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STATE OF FLORIDA

FORTY-FOURTH ANNUAL REPORT
of the
STATE BOARD OF HEALTH

FOR THE YEAR ENDING
DECEMBER 31, 1943

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HENRY HANSON, M. D.
Florida State Health Officer

FLORIDA STATE BOARD OF HEALTH
Jacksonville, Florida
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FLORIDA STATE BOARD OF HEALTH
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His Excellency, SPESSARD L. HOLLAND,
Governor of Florida
Tallahassee, Florida

SIR:

I beg to hand you herewith a report of the Florida State Board of Health for the period of January 1, 1943 to December 31, 1943, inclusive.

Respectfully submitted,

HERBERT L. BRYANS, M. D.
President

Jacksonville, Florida
September 1, 1944

The Honorable HERBERT L. BRYANS, M. D., *President*
Florida State Board of Health
Jacksonville, Florida

DEAR DR. BRYANS:

I herewith submit the forty-fourth annual report of the Florida State Board of Health for the year ending December 31, 1943.

Respectfully submitted,

HENRY HANSON, M. D.
State Health Officer

Jacksonville, Florida
September 1, 1944

TABLE OF CONTENTS

Epidemiology 1
Dental Health 86
Narcotics 91
Vital Statistics 93
Tuberculosis 95
Local Health Service 99
Finance and Accounting 108
Maternal and Child Health 113
Laboratories 118
Sanitary Engineering 151
Venereal Disease Control 181
Merit System Council 209
Public Health Nursing 211
Malaria Research 215
Health Education 221
The Library 228

EPIDEMIOLOGY

E. F. HOFFMAN, M.D., Director

PERSONNEL

The activities of the Bureau of Epidemiology during 1943 were under the direction of E. F. Hoffman, M. S. P. H. Though the Bureau of Epidemiology budget provides for an assistant and a student epidemiologist, these could not be employed because of the scarcity of available applicants caused by war conditions. Instead the director employed one additional clerical assistant and approved the employment of an additional general public health nursing consultant with funds originally budgeted for an assistant epidemiologist, to work out of the Bureau of Public Health Nursing. It was agreed by the two bureaus that all State public health nursing consultants would be made more available for epidemiological consultation to all the counties and for epidemiological follow up in counties without any public health personnel.

The responsibility of Epidemiological Activities for approved county health departments has been placed with the directors of those counties, who in cooperation with the U.S.P.H.S. were appointed as Assistant Collaborating Epidemiologists to the State Health Officer (Collaborating Epidemiologists) and to the Surgeon General.

Appointment of some one physician in each county without an approved Health Department to act as assistant collaborating epidemiologist for the respective county until such a time as an approved Health Department can be established was begun. These appointments are made upon the approval of the local medical group, the county Board of Commissioners and the Board of Education.

OFFICE ACTIVITIES

Expanding activities of the department have increased the need for additional clerical personnel. The present staff of two clerical assistants is not sufficient to meet the demands on this Bureau.

The Senior Stenographer, under the direction of the director, is assigned to taking dictation, opening, sorting, filing, writing and mailing correspondence, typing manuscripts and reports, preparing and mailing circular letters, memoranda and health cards, and purchasing and dispensing insulin.

The typist was assigned to the recording, tabulation and filing of morbidity and carrier reports, the composition and maintenance of morbidity graphs, charts and spot maps and the compilation of weekly, monthly and annual epidemiological reports from the Bureau.

NEW RULES, REGULATIONS AND POLICIES

To provide the State Board of Health and the county Health Departments with more prompt and complete morbidity reporting, facilitating earlier tabulation, investigation, study, segregation and isolation or quarantine of persons having, or suspected of having, any communicable, contagious, infectious or other reportable disease; to facilitate the treatment, segregation, isolation and disinfection of all animals or birds having, or suspected of having, diseases communicable to man: to provide more prompt and complete reporting of reportable disease mortality; to facilitate cross checking to see that each death was reported as having been a case of illness and to facilitate making a comparison of morbidity and mortality incidence, all county health departments, armed force stations, government institutions, physicians or other persons were directed to send in morbidity reports through the county health departments, or if there is no county health department directly to this Bureau. Daily and weekly Reportable Disease Morbidity and Mortality summary sheets were requested from county health departments, armed force stations and government institutions on the special forms EPI., No. 3 and No. 6.

All health departments were requested to keep a copy of each individual and summary morbidity report on file in their respective offices. Local morbidity files were to be set up for filing morbidity reports alphabetically by diseases.

All morbidity reports were to be checked locally for accuracy, completeness and authenticity before sending same in to this Bureau as an official report.

All cases of illness were requested to be allocated to the *Place of Onset* of the symptoms which prompted the first diagnosis of the disease being reported.

Health Departments are now being requested to record all positive and negative follow up laboratory reports of dangerous communicable diseases received locally on the proper individual record (age group record, Epidemiological case record, carrier record or Health Examination Certificate). This will assist in obtaining complete reporting because any positive laboratory report on a dangerous disease demands a morbidity report and the necessary epidemiological follow up. The policy of writing each physician in whose name a positive laboratory report was made for which no corresponding morbidity or carrier report has been received, is being continued. In this way the laboratory findings in question are verified by the clinical findings of the attending physician and many unreported cases are being promptly reported on receipt of the letter of reminder.

Many of the County Health Departments now have a mortality file set up for filing the pink copies of the copies of the original death certificates. These pink copies are now made available to the counties through the local registrars appointed by the Bureau of Vital Statistics of The State Board of Health. Unfortunately the franking privilege is not available for sending these reports to the county health departments. Each department is required to furnish postage for mailing or must call for the death certificate copies by messenger.

The health departments have been asked to check all death certificates on deaths due to reportable diseases and see that a corresponding morbidity report has been made.

Special carrier files are now being set up in each county health department for recording a carrier record on all carriers reported including all potential tuberculosis (far advanced tuberculosis cases either waiting to be institutionalized or discharged as incurable) and arrested cases of leprosy who are released from the Leprosarium at Carville and must be kept under surveillance. Quarterly reports are required on all carriers. Duplicate reports on all carriers are to be sent to the State Board of Health to be kept in the master file of carriers in this Bureau.

No new rules or regulations were added to Chapter XXXIV of the Florida State Sanitary Code during 1943.

REPORTING BY ARMED FORCE STATIONS

Early in the year the commanding medical officers of approximately 150 army, navy, coast guard or marine stations were contacted by letter or personal visit by a local health department or State Board of Health representative and were asked to send in individual, daily and weekly summary sheets of all reportable diseases occurring at each air field, base or station. Due to the large turn over of commanding medical officers it was impossible to obtain a consistent uniform and complete reporting from all the stations. However the commanding medical officers, whenever contacted were most cooperative and have done everything possible to cooperate with the State Board of Health in supplying the required reports. Although there is still considerable ironing out to do in our system of reporting from the armed force stations it is felt that the effort was justified and that the completeness of reporting will improve in the ensuing year.

TABULATION AND ANALYSIS OF STATISTICAL DATA

The morbidity reports are now being channeled through all the County Health Departments in the State. Most of the departments now have morbidity files containing duplicate copies of all morbidity reports for their respective areas, including armed force stations morbidity reports. With but one or two exceptions the county health departments are now sending in daily morbidity report summaries and weekly cumulative morbidity report summaries. This has greatly facilitated the cross checking of reports and has aided this department with its limited personnel to get our weekly reports more accurately and promptly. All local health departments have been requested and are now checking all morbidity reports for duplication, completeness of data and authenticity. Each card is allocated to the Place of Onset of the symptoms upon which the first diagnosis of the illness was made. The Bureau of Epidemiology double checks all cards for duplication, completeness of data, and allocation before including them in our official report to the Surgeon General's office.

The corrected morbidity reports are compiled as a weekly report for the State of Florida and by counties. These reports, which also contains figures for the corresponding weekly report of last year and the five year mean for the corresponding weeks of the past five years also contains a cumulative summary of all morbidity reports received for the current year to date.

All morbidity report duplicates are now being returned to the counties for correction of their respective reports. The added amount of data now included in the corrected weekly reports from this Bureau should facilitate local morbidity studies and control. Comparisons can now be made with the current morbidity incidence in adjoining counties. Comparisons of current State totals with the reports of previous years are also being made.

In addition to newer statistical tables the statistical summary tables begun and published in last year's report are being brought up to date for the use of physicians, health departments, students and others interested. Many of these tables are included in this report.

GRAPHS AND SPOT MAPS

Line graphs showing the weekly rise and fall of morbidity incidence for the year 1943 are included in this report under the summary statement on morbidity incidence of each dangerous communicable disease. Spot maps showing the current incidence of certain dangerous communicable disease have been maintained throughout the year in this Bureau and the maps showing the total incidence of each of these diseases is also included in this report.

County health units are being stimulated to maintain and present statistical data collected locally by graphs and spot maps. Very few of our counties have made use of these methods in connection with local incidence of morbidity.

HEALTH EDUCATION

During the year 50,000 copies of the wall chart containing "Vital Information Concerning the Prevention of Communicable Diseases" were distributed to physicians, health departments, schools, colleges and other interested persons in and outside the State of Florida.

A manual, "Information Concerning Epidemiological Principles, Materials and Methods" designed to serve as a teaching manual and guide for county health departments was developed and distributed to all the county health departments. The same manual, which contains a general outline of epidemiological methods, procedures and recommended forms for use in the county and state reportable disease control activities, was also used as reference material in the assignments of the General Extension Course in Public Health, Epidemiology I, being given jointly by the University of Florida in cooperation with the State Board of Health.

Another publication "Information Concerning the Use of Biologicals and Other Treatment in the Prevention and Control of Communicable Diseases" especially prepared for the family physician was prepared and published. Over 600 copies of this booklet have been sent out.

During the course of the year newspaper articles were written on various communicable disease subjects and several articles were written for "Health Notes" on Epidemiology; "Immunization for Protection"; "Recommended Emergency Immunization"; "Hookworm Treatment Program"; "Health Certification of Food Handlers."

Two articles entitled "The Selection of Pupils for Public Health Examinations" and "The School Health Service" were written in cooperation with the Bureau of Health Education as contributions to Bulletin No. 4, ''Florida's School Health Program'', published jointly by the State Department of Education and the State Board of Health.

During the year the Bureau of Epidemiology has also contributed toward the war-time training of sanitation personnel by writing a course titled Public Health, Epidemiology I, which is being conducted by the University of Florida, General Extension Division, in cooperation with the Florida State Board of Health.

This course consists of an epidemiological study of all reportable diseases common in Florida. It is primarily a reading course which serves as an introduction to other courses offered in Public Health. The course outline follows:

There were 26 enrollments in this course during 1943. Nineteen of these have turned in assignments. Twelve of these have completed over half of the assignments and eight have about completed the course and the other 7 have failed to forward assignments for one reason or another.

UNIVERSITY OF FLORIDA
GENERAL EXTENSION DIVISION
Gainesville, Florida

PUBLIC HEALTH EPIDEMIOLOGY I

OUTLINE OF COURSE—PRELIMINARY STATEMENT

Part I

Assignment 1 Epidemiological Principles, Materials and Methods.

Part II

Assignment 2 Infection, Immunity and Prevention.

Part III

Diseases of the Gastro-Intestinal Tract, Spread Largely Through Alvine Discharges.

Assignment 3 Typhoid Fever.
Assignment 4 Undulant and Paratyphoid Fever.
Assignment 5 Food Poisoning Group; (Salomonella infections, Botulism, Bacillary Dysentery).
Assignment 6 The Dysentery Group; (Cholera, Bacillary, Amebic and Balantidial Dysentery).
Assignment 7 The Parasitic Group; (Hookworm, Amebic and Balantidial Dysentery, Trichinosis and other Parasitic Infections).

Part IV

Diseases of The Respiratory Tract, Spread Largely Through Discharges of the Mouth and Nose—

I. Respiratory Diseases Caused by Bacteria

Assignment 8 **Bacilli Group**—Diphtheria, Vincents Infection, Leprosy, Pulmonci Plague, Tuberculosis and Whooping Cough.
Assignment 9 **Cocci Group**—Streptococcic Infections, Pneumococci Pneumonia and Meningitis.

II. Respiratory Diseases Caused by Vires.

Assignment 10 **Upper Respiratory Group**—Common Cold, Influenza, Pscittacosis and Mumps.
Assignment 11 **Skin Group**—Smallpox, Chickenpox, German Measles and Measles.
Assignment 12 **Cerebrospinal Group—Encephalitis, Lymphocytic Choriomeningitis, Acute Anterior Meningitis.**

Part V

Diseases in which Infection is Introduced Largely Through the Mucous Membrane of Skin by Contact; Trauma or the Biting Insect.

Assignment 13 1. Diseases spread through Mucous Membrane by Contact: Syphilis, Gonorrhea, Ophthalmia Neonatorum, Infectious Jaundice, Chancroid, Granuloma Inguinale, Lymphopathia Venerea, Weils Disease, etc.
Assignment 14 2. Diseases Spread through the Mucous Membrane or Skin Through Mechanical Trauma, Animal Bites and Infections or Infestations:
  a. Mechanical Trauma: (Impetigo Contagiosa, Tetanus, Tularemia).
  b. Animal Bites: (Rabies, Rat Bite Fever).
  c. Infections or Infestations: (Scabies, Pediculosis, Bed Bugs, Roaches, Infectious Jaundice (Weils Disease), Hookworm.
Assignment 15 3. Diseases Spread Through Mucous Membrane or Skin by Insect Bite or Insect-like Organisms:
  a. Mosquitoes: (Malaria, Yellow Fever, Dengue, Filariasis).
  b. Flies: (Tryhanosome Diseases, Pappataci Fever, Leshmaniasis).
Assignment 16 c. Fleas, Lice, Ticks:

Lice:	Epidemic Typhus......1.	Rickettsial Diseases
Fleas: (Fleas of rats or other rodents)	Plague Endemic Typhus......2	
Ticks:	Rocky Mountain Spotted Fever......3 Relapsing Fever Texas Fever	

Assignment 17 4. General Principles——Insecticides.

Part VI

Deficiency Diseases

Assignment 18 Vitamins and other Nutrients and Their Metabolic Relationship.
Assignment 19 Protein and Carbohydrate Deficiencies.
Assignment 20 Vitamins A, C, D, E and K Deficiencies.
Assignment 21 Vitamin B Complex Deficiencies.
Assignment 22 Goitre, Sprue, Pernicious and Nutritional Macrocytic Anemia and other Nutritional Deficiency State.
Assignment 23 Early Deficiency Diseases—Pathology, Physiology, Recognition and Treatment.
Assignment 24 Nutrition as it Affects Pregnancy, Teeth, Eye, Wound Healing, Practice of Medicine, and Military Personnel.

HEALTH CERTIFICATION OF FOOD HANDLERS

In an effort to reclaim health certification from disrepute and place it on a practical epidemiological and educational basis, the State Board of Health in cooperation with the physicians and various other state agencies concerned with health certification has, through its various Bureaus including the Bureau of Epidemiology, made considerable effort to introduce a uniform state system of health certification for participation in any vocation, avocation or job.

As a step in this direction a health card, designed to put the health certification regulation of Chapter XXXIV of the Florida State Sanitary Code into effect was developed, approved, printed and distributed to all health departments and physicians in unorganized counties in the state.

Although directives were written outlining the epidemiological approach for the examiner, many of the examining physicians still cling to the erroneous idea that the examination of the individual for venereal diseases is all that matters, leaving out of consideration entirely those diseases frequently spread in public by direct contacts, such as tuberculosis, typhoid and salmonella including the paratyphoids and the dysenteries. However the improvement in interest and method of examination has been encouraging and of sufficient significance to warrant continuing the present method of certification.

Health cards are now being issued to anyone who because of Florida state law or for other reasons is required to present a certificate of health for purposes of travel, attendance at or visits to camps or institutions or for employment or participation in any other vocation or avocation.

During 1943 over 10,000 health cards were issued by the organized county health departments and the Bureau of Epidemiology. Considering that there are over 8,000 restaurants in the state alone this number of health certificates is only a very small percentage of the food handlers who come under the new State Board of Health food handlers health certification regulation.

Our carrier files now contain the names of several persons found to be carriers of typhoid bacilli, salmonella, ameba, shigella and tuberculosis bacilli who were found in the course of examination for health certification. Three individuals occupied in the oyster industry were found to be typhoid carriers. One woman typhoid carrier was found to be running a combination tavern and restaurant. Another woman typhoid carrier was found employed as a cook in a school lunch room. One individual with far advanced tuberculosis was found employed as a waiter in a restaurant and has since passed away as a result of his tuberculosis infection.

A recent outbreak of bacillary dysentery in a hospital in the state apparently had its inception with contaminated food handled by a carrier.

Although certification is by no means a catch-all for carriers, yet the stimulation of interest in the maintenance of personal health as a protection of the public will, it is believed, assist considerably in reducing the incidence of infection due to the carrier state and will also contribute toward the development of general public health-mindedness and the development of better health habits and attitudes in general.

DISTRIBUTION OF INSULIN

Certain complaints that insulin was not being made readily available throughout the state to diabetic patients prompted this Bureau, which has been made responsible for its distribution, to develop a plan of distribution for supplying the health departments with an initial stock supply of insulin and with publicity material. A system of forms for application, dispensing, reporting and ordering of new insulin stock each month were developed and distributed to the county health departments. Insulin is now available and is being dispensed locally through all county health departments. Insulin has continued to be dispensed directly from this Bureau to counties without County Health Departments.

The following three tables show:

A. The Distribution of Insulin by Counties for the State of Florida for 1943.

B. The Number of Vials of Each Strength and the Total Number of Vials of Insulin Purchased for 1943.

C. The Total Amount Spent for Insulin and the Average Price per Vial 1943.

MEDICAL PERSONNEL ACTIVITIES

Because of the marked decrease in the medical personnel of this Bureau it has become necessary for the director to place more and more responsibility for epidemiological investigations and follow-up upon the local health officers. Every county health department director has been officially appointed by the Surgeon General of the U. S. P. H. S. and the Florida State Health Officer as Assistant Collaborating Epidemiologist for his respective county or counties. The Federal and State appointments charge the assistant collaborating epidemiologists with the responsibility of assisting the State Collaborating Epidemiologist (State Health Officer) and the Director of the Bureau of Epidemiology with the collection of morbidity reports from physicians and other persons within their jurisdiction; the giving of advice regarding reportable disease control; enforcing or causing to be enforced the laws, rules and regulations of the Florida State Sanitary Code pertaining to the control of communicable diseases and informing the State Board of Health regarding the occurrence of unusual outbreaks of communicable diseases.

The assistant collaborating epidemiologist is also charged with the responsibility of giving advice in the development of local programs designed to prevent the occurrence of reportable diseases.

During 1943 it was necessary to rely considerably upon the assistance of the Bureau of Public Health Nursing consultants in the making of epidemiological follow-ups in counties without health departments. The assistance of the county or school nurse functioning in a county without an approved health department was also secured in making epidemiological studies locally.

The director of the Bureau in visiting the various unorganized counties made considerable effort to stimulate the development of year around program of immunization and hookworm treatment as a school health service to act as a nucleus for the development of a maternal and child health service for the county.

An effort has been made to tie this service in with the venereal disease clinical services which the State Board of Health, through the Division of Venereal Disease Control, now has functioning in practically every county in the state.

TABLE A.—DISTRIBUTION OF INSULIN BY COUNTIES FOR THE STATE OF FLORIDA FOR 1943.

COUNTIES	PROTAMINE ZINC		PLAIN INSULIN		
	10 U 40	10 U 80	10 U 20	10 U 40	10 U 80
Alachua	150	19	19	16	21
Baker	30	5	5	20	0
Bay	10	5	19	15	0
Bradford	30	5	5	10	0
Brevard	0	0	0	17	0
Broward	20	5	10	20	0
Calhoun	0	0	0	0	0
Charlotte	28	0	0	0	0
Citrus	28	0	0	0	0
Clay	11	36	5	22	0
Collier	0	0	0	0	0
Columbia	0	0	9	46	0
Dade	23	7	10	20	0
DeSoto	9	0	4	196	66
Dixie	0	0	0	0	0
Duval	814	481	183	288	0
Escambia	62	35	20	56	0
Flagler	0	0	4	0	0
Franklin	20	5	10	20	0
Gadsden	54	5	10	63	0
Gilchrist	0	0	0	0	0
Glades	0	0	0	0	0
Gulf	0	0	0	0	0
Hamilton	0	0	0	0	0
Hardee	23	44	18	57	21
Hendry	0	0	0	0	0
Hernando	0	0	0	0	0
Highlands	20	5	10	15	0
Hillsborough	56	28	19	36	0
Holmes	0	0	0	0	0
Indian River	18	0	0	0	0
Jackson	20	10	10	15	0
Jefferson	16	8	5	10	0
Lafayette	0	0	0	0	0
Lake	17	5	10	36	0
Lee	22	0	0	2	0
Leon	27	5	20	20	0
Levy	10	5	5	32	0
Liberty	0	0	0	0	0
Madison	38	12	30	10	0
Manatee	0	0	0	0	0
Marion	45	0	0	32	0
Martin	0	0	0	0	0
Monroe	16	5	5	10	0
Nassau	75	5	5	58	0
Okaloosa	14	5	5	47	0
Okeechobee	0	0	0	0	0
Orange	313	142	50	271	17
Osceola	0	0	0	0	0
Palm Beach	116	3	28	45	0
Pasco	7	8	0	34	0
Pinellas	141	5	145	20	0
Polk	179	42	50	361	0
Putnam	19	0	67	58	0
St. Johns	1	0	27	2	0
St. Lucie	70	0	1	8	0
Santa Rosa	10	27	5	49	0
Sarasota	22	0	0	0	0
Seminole	10	5	23	35	0
Sumter	0	0	21	0	0
Suwannee	5	0	90	53	0
Taylor	12	5	10	19	0
Union	0	0	0	0	0
Volusia	12	32	67	57	0
Wakulla	10	5	5	10	0
Walton	12	13	10	28	0
Washington	10	5	5	22	0

TABLE B.—THE NUMBER OF VIALS OF EACH STRENGTH AND THE TOTAL NUMBER OF VIALS OF INSULIN PURCHASED FOR 1943.

PROTAMINE ZINC		PLAIN INSULIN		
10 U 40	10 U 80	10 U 20	10 U 40	10 U 80
131	70	120	152	10
150	90	50	200	75
80	150	70	170	120
150	100	100	200	100
250	100	230	200	90
395	150	100	300	10
400	200	100	420	10
420	200	150	300	
300		110	250	
200		40	250	
100		40		
100				
300				
Total 2,976	1,060	1,110	2,442	415

TABLE C.—THE TOTAL AMOUNT SPENT FOR INSULIN AND AVERAGE PRICE PER VIAL FOR 1943

Organizations	Protamine Zinc		Plain Insulin			Total Amount Spent
	10 U 40	10 U 80	10 U 20	10 U 40	10 U 80	
Surgical Supply Co. Jacksonville, Fla.	.63	1.20	.32	.55	1.09	$ 493.03
Sharpe & Dohme Philadelphia, Pa.					1.11	11.10
Halliday's Apothecary Jacksonville, Fla.	.63	1.20	.32	.55	1.09	1,305.10
J. K. Attwood 1024 Park St. Jacksonville, Fla.	.63	1.20	.32	.55	1.09	3,425.25
TOTAL AMOUNT SPENT 1943						$5,223.38

COMMUNICABLE DISEASES IN FLORIDA 1943

Emphasis on the control of such communicable diseases as smallpox, diphtheria, typhoid and whooping cough for which we have prophylactic treatment will persistantly decrease the incidence of these diseases and gradually reduce the need for epidemiological investigation to a minimum. However until this phase of public health work can be complete, epidemiological investigation and follow-up for the purpose of learning the source of the infection and preventing the spread of the disease will continue to be necessary for these as well as other dangerous communicable diseases for which we have no generally established prophylactic measures.

The Bureau is requesting that epidemiological records be obtained on all cases of dangerous communicable diseases (see directive and Form CHW #4) and that a copy of each report be forwarded to the Bureau of Epidemiology.

Table 1 of this report, "Summary of Communicable Disease Epidemiological Follow-Up", shows a definite interest and effort by many of the counties to maintain and improve the epidemiological follow up of cases in their respective counties. It is hoped that in-service-training of health department personnel for the doing of epidemiological work will help to improve this service still more in the future.

ANTHRAX

No cases of anthrax were reported for 1943. Only 1 case was reported within the past 5 years. This case was reported from Tallahassee, Florida in 1941. Diagnosis was made on the basis of a culture of material obtained from a skin lesion. The patient was an agricultural worker who was caring for cattle. The exact source of the infection was never determined and the patient apparently recovered.

BOTULISM

No cases of botulism have been reported to this Bureau for the past five years.

CANCER

There were 429 new cases of cancer reported during 1943 as compared to 384 in 1942 and 351 in 1941. The 5 year mean remains at 344 showing an increase over previous years. In 1942 there were 1,955 resident deaths due to cancer which was third in the ten leading causes of death for Florida. Comparison of the above figures show that the morbidity reporting for cancer is apparently incomplete.

Efforts through the Florida Women's Field Army in conjunction with the Florida Medical Association are being made to establish free clinics for the early diagnosis and treatment of this disease. In as much as early diagnosis is of paramount importance in curing this disease, it is felt that this type of service will do much to reduce the high mortality rate due to cancer.

Statistical figures on the morbidity and mortality of cancer will be found in tables 7, 8 and 9.

CONJUNCTIVITIS

Because of the frequency of conjunctivitis in connection with war industry this disease was made reportable in 1942. Only 15 cases were reported in 1943 although the incidence of this disease was probably much greater. Unofficial reports indicate that this infection very commonly preceded many of the cases of measles which occurred during the year. Several of the cases of conjunctivitis reported were war plant workers.

INFANTILE DIARRHEA

There were 42 cases of infantile diarrhea reported during 1943, as compared to none in 1942 and 7 in 1941. None of these cases were studied. It is felt that a closer check should be made of those cases occurring in connection with infant care in our hospitals and institutions.

In 1942, 130 deaths were reported due to infantile diarrhea and enteritis. Of these, 134 were under 1 year of age, 162 were under 2 years of age and 68 were 2 years or over.

These figures show that the morbidity reporting of infantile diarrhea is very incomplete. Better reporting of these illnesses in infants would facilitate earlier epidemiological follow up and the institutions of earlier and better infant care which should and would decrease the number of deaths due to this disease.

DIPHTHERIA

We again had 242 cases of diphtheria in 1943 as compared to 258 in 1942 and 212 in 1941. The 5 year mean was 290. A total of 27,016 diphtheria immunizations were reported during 1943. Of this number, 25,233 were reported from counties with organized Health Departments, and 1,783 from counties without organized

county health department services. Several unorganized counties did not report. In 1942 there were 28 deaths in Florida due to diphtheria. Of these, 21 were white and 7 colored. Twenty one of these deaths were between the ages of 1 to 4. This definitely proves that we have not as yet completely protected the pre-school children who fall in the dangerous age period for this disease. We can and must put more emphasis on the immunization of ill infants and preschool children. Deaths due to this disease should and could be eliminated by the well established prophylactic and treatment procedures now at hand.

Observations reveal that health officers as well as private physicians who are neglecting the safer prophylactic procedure or administration of diphtheria toxoid to the pre-school child are grasping at the more dangerous treatment procedure and are giving diphtheria antitoxin to contacts without any apparent symptoms of the disease. This practice is to be condemned because a certain percentage of children treated promiscuously with such animal serums will become sensitized, prohibiting a later administration of the same or other life saving serum without desensitization and endangering the life of the individual if sensitivity is not detected prior to another treatment with a horse serum.

Spot Map 1 on diphtheria shows a general distribution of the incidence of this disease and Line Graph 1 shows that the disease was prevalent throughout the year having its lowest incidence in June, with a comparative increase in incidence in September and with the peak in October and November and again declining to a lower incidence in January.

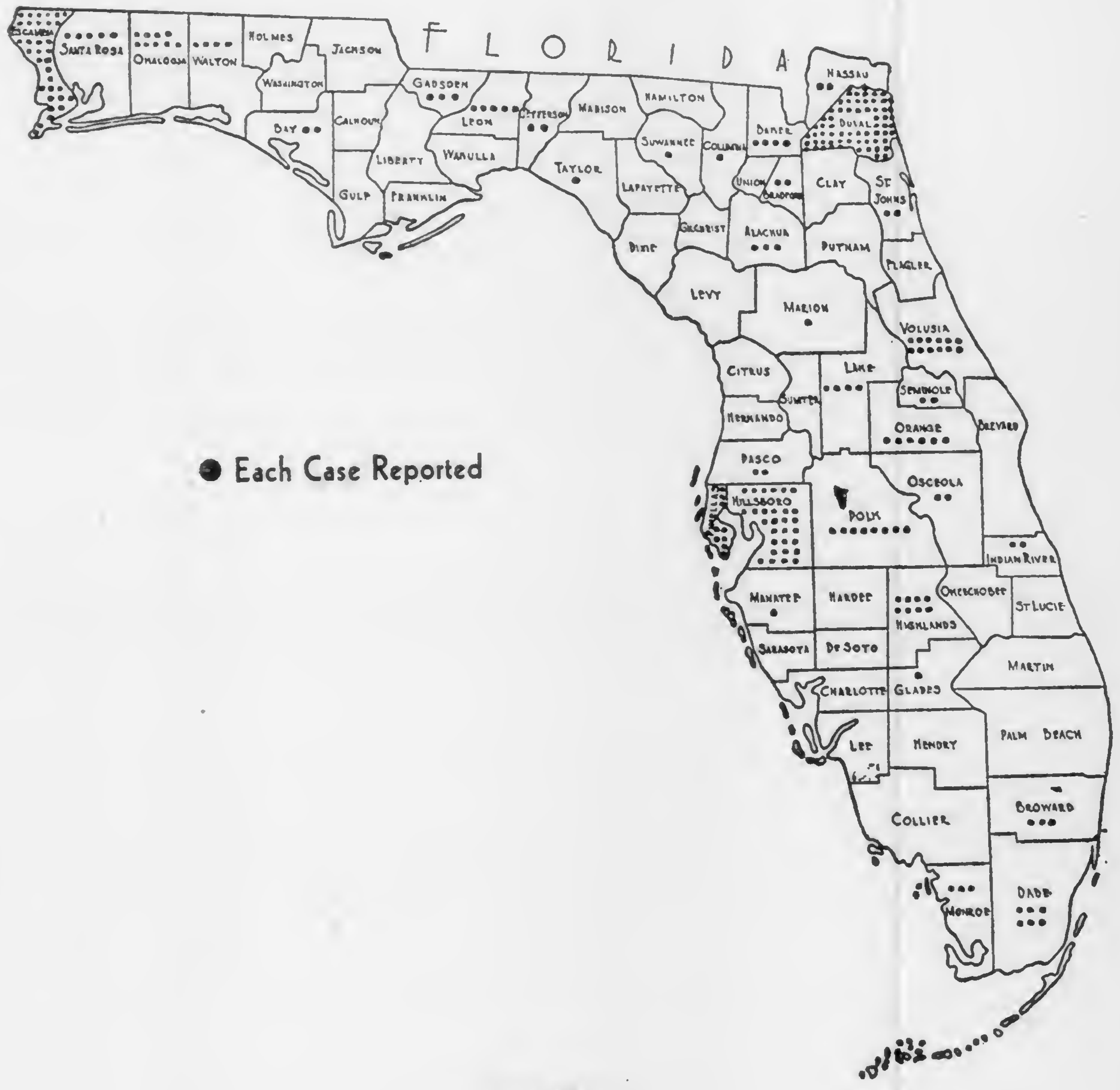
DYSENTERY

A total of 336 cases of dysentery were reported in 1943 for Florida.

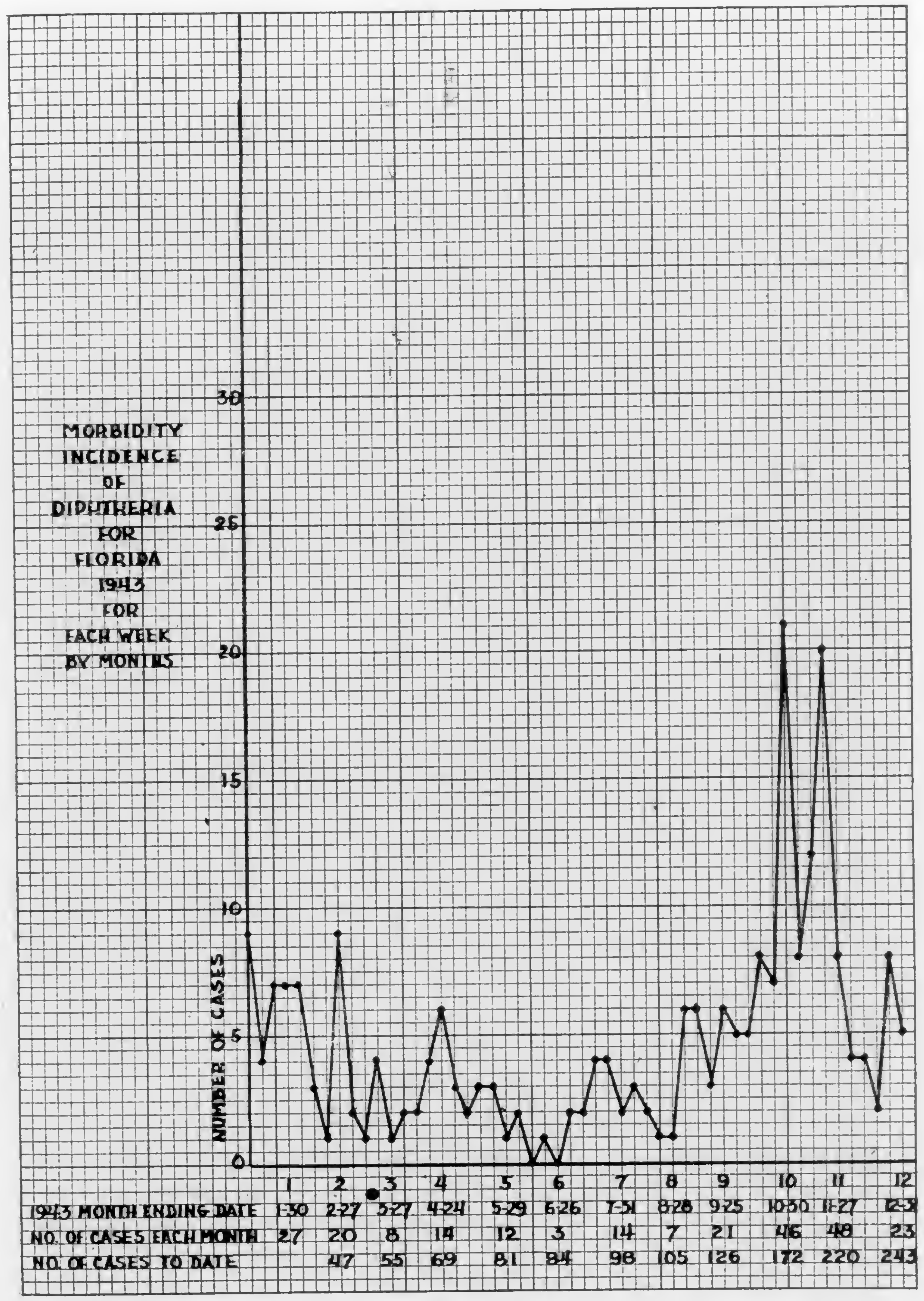
AMEBIC DYSENTERY

There were 132 cases of amebic dysentery, ninety nine or over two thirds of which occurred in Gadsden County. Most of the Gadsden County cases were reported from the State Hospital for the Insane at Chattahoochee, Florida. It will be noted that the above figure shows a marked increase in the reporting of this disease over 1942 and 1941 in which 25 and 32 cases were reported respectively.

MORBIDITY INCIDENCE OF DIPHTHERIA FOR FLORIDA
BY COUNTIES—1943.



Spot Map 1



1943 MONTH ENDING DATE	1-30	2-27	3-27	4-24	5-29	6-26	7-31	8-28	9-25	10-30	11-27	12-3
NO. OF CASES EACH MONTH	27	20	8	14	12	3	14	7	21	46	48	23
NO. OF CASES TO DATE		47	55	69	81	84	98	105	126	172	220	243

Line Graph 1

BACILLARY DYSENTERY

In 1943 a total of 180 cases of bacillary dysentery were reported as compared to 47 in 1942 and 18 in 1941, likewise showing an increase in reporting.

More intensive laboratory work on these diseases has revealed carriers of both the endomoeba hystolitica in the encysted forms and shigella (dysentery bacilli).

A total of 21 dysentery bacilli carriers have been reported to this Bureau.

A total of 37 deaths due to all forms of dysentery were reported in 1942 as compared with 268 in 1917.

DYSENTERY OUTBREAK, JACKSON MEMORIAL HOSPITAL, MIAMI, FLORIDA

During the period September 3 to October 22, 1943, an outbreak of dysentery occurred at the Jackson Memorial Hospital at Miami, Florida.

Reports by the Miami Health Department and the Superintendent of the hospital now on file in this office described many unsanitary conditions throughout the hospital system and particularly in the dietary department.

A visit to the hospital by the director of this Bureau confirmed the conditions described. It was recommended to both the health department and the Jackson Memorial Hospital officials that adequate study and follow up of all cases be instituted, that adequate records be made and that all faulty sanitation facilities be corrected as soon as possible. The hospital was advised to comply with the Florida State Sanitary Code regulations including the health certification regulation, Chapter XXXIV, requiring health certification of food handlers.

A few of the unsanitary conditions have been corrected but as yet the health certification regulation, Chapter XXXIV of the State Sanitary Code, has not been complied with.

A total of 144 cases of dysentery were reported. No epidemiological case records were ever received by this Bureau on any of the cases, therefore the accompanying report is consequently very meager. However, it will be noted that the first case of bacillary dysentery had its onset on September 3, 1943. This case was in the person of one of the hospital internes. Other single cases occurred two weeks later on September 12, 13, 14, 18 and 20th. From September 21 to 26th there was a gradual increase followed with a slight fall in the number of cases and then another increase up to 17 cases

on October 16th after which the number of cases reported gradually dwindled to one case reported on October 11th. One straggling case was reported ten days later on October 22. Of the total 144 cases reported, 49 were student nurses; 24 graduate nurses and 16 were unspecified as to work. The remainder of cases were distributed by ones, twos, and threes among the various other types of employment in the hospital.

A cursory check was made on stool specimens submitted by the various individuals but these checks as will be noted from the statements made in the reports, were made late in the course of the outbreak. As a result only four specific laboratory diagnoses of shigella-sonne were made on four individuals. These reports together with the mild nature of the clinical symptoms can probably be accepted as evidence as to the etiology of the outbreak.

It is of passing interest to note that the cases occurred more frequently in females probably because the hospital population of 600 persons was made up largely of females. Most of these were white. The ages of the cases, except for one infant in the nursery, ranged from 14 to 60 years. The majority of the individuals were in the age group 18 to 25.

Undoubtedly the unsanitary conditions in the kitchen played an important part in the spread of the infection. What part the first case reported on September 3, 1943, might have played in the development of later cases is problematical. The superintendent of the hospital states in his report that the butcher's assistant had been ill the week prior to September 22 when lamb was served and prior to September 24 when an egg salad was served. It is probable that an unknown carrier instigated the whole affair. No reports were submitted designating whether a local effort was made to identify such a carrier by release cultures.

INFLUENZA

A total of 782 cases of influenza had been reported at the close of the year 1943 as compared to 227 in 1942 and 3,832 in 1941. There was an appreciable increase in the number of reports received in the last three months of 1943 indicating a beginning moderate epidemic. Clinical symptoms of the reported cases compared with reports of similar illness being reported in other states showed that the consensus of opinion among epidemiologists throughout the states was that most of the reported cases were true but mild-virus infections comparable to the influenza of previous epidemic years.

INFECTIOUS JAUNDICE

Twenty-seven cases of infectious jaundice were reported in 1943. This disease has recently been added to the list of reportable diseases. Unofficial reports from the various parts of the state seem to indicate that this disease is more commonly prevalent in Florida than is appreciated at this time.

Recent studies of infectious jaundice have shown that two infectious diseases giving similar clinical symptoms associated with jaundice do occur. Both infections are apparently transmissable by rats but one caused by a spirochete, icterohemorrhogica (Weil's Disease) and the other by a virus.

Which of the two types of jaundice is prevalent in Florida would have to be determined through research.

Previous studies have revealed that this disease causes considerable economic loss of time especially when affecting adults. It has also been noted that the clinical symptoms are progressively more severe and debilitating as one goes up the age scale of life. Preschool

TABLE D

Jackson Memorial Hospital Dysentery Outbreak—Sept. 3 to Oct. 22

TABULATION OF DYSENTERY CASES
BY OCCUPATION

Student Nurses	49
Graduate Nurses	24
Other Unspecified	16
Orderlies	5
Maids	5
Lab Technicians	5
Bookkeepers	4
Clerks	3
O B Cases	3
Internes	3
Seamstresses	3
Kitchen Help	3
Nurses Aides	3
Lab Workers	2
Student Technicians	2
Waitresses	2
Radiologist	1
Infant	1
Secretary	1
Butcher	1
Laundress	1
Laundry Worker	1
Stenographer	1
Dir. Soc. Service	1
Nutritionist	1
Elevator Operator	1
Store Keeper	1
Telephone Operator	1
TOTAL	144

TABLE F

Jackson Memorial Hospital Dysentery Outbreak—Sept. 3 to Oct. 22

TABULATION OF DYSENTERY CASES BY AGE

Age	L	1	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39
No. of Cases		1	1	0	1	1	14	10	17	7	4	8	9	2	2	5	1	1	7	2	0	4	3	1	2	3	0	1

Age	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	Unspecified
No. of Cases	1	1	2	1	0	1	1	1	0	2	0	2	2	2	2	1	0	1	0	0	2	15

TABULATION OF DYSENTERY CASES BY DATE OF ONSET

September

Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
No. of Cases			1									1	1	1				1		1	3	1	6	4	16	13	6	7	8	8	

October

Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
No. of Cases	13	11	5	17	10	1	2	5			1											1									
TOTAL	144																														

TABLE E

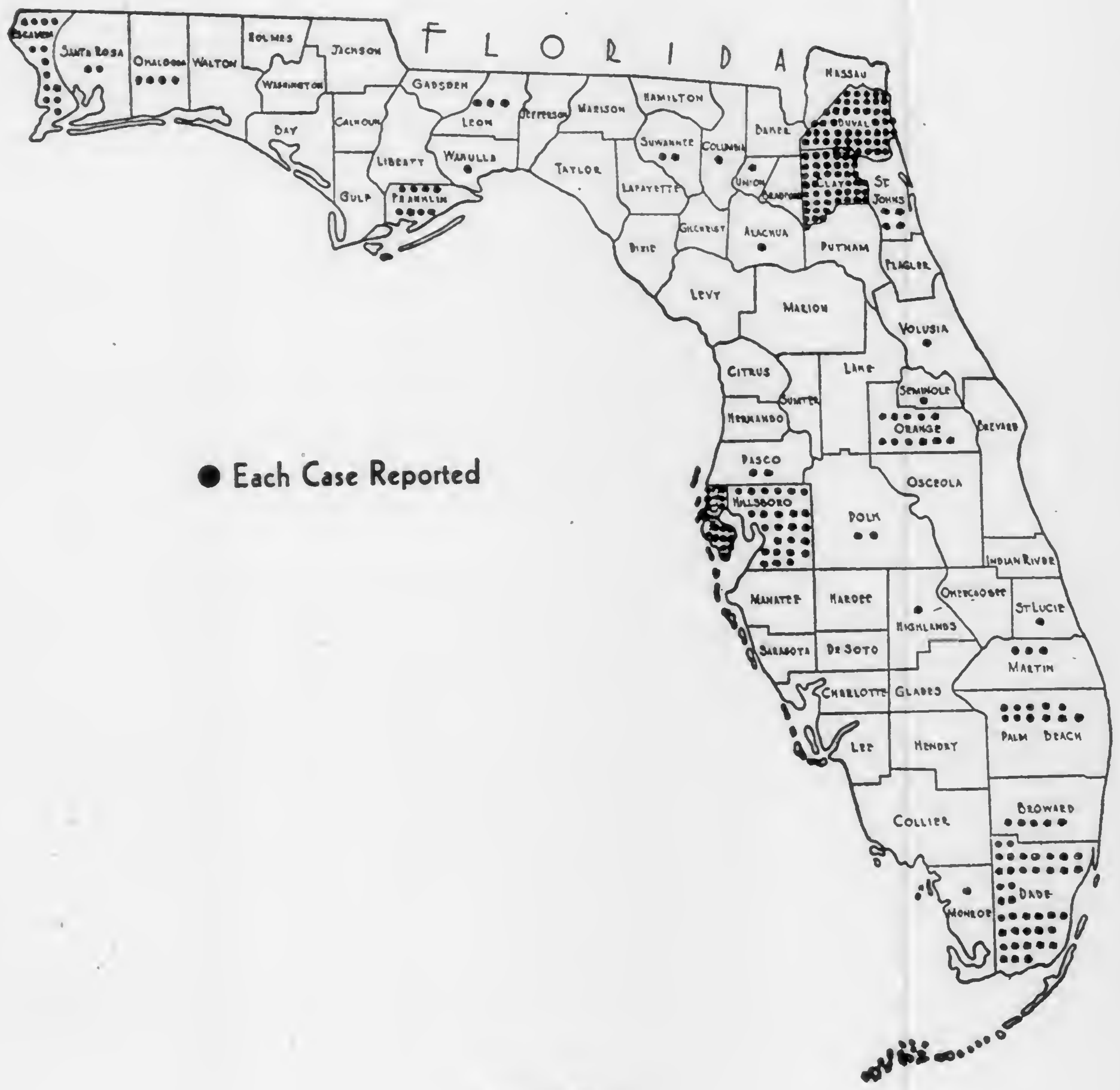
Jackson Memorial Hospital Dysentery Outbreak—Sept. 3 to Oct. 22

TABULATION OF DYSENTERY BY SEX & COLOR

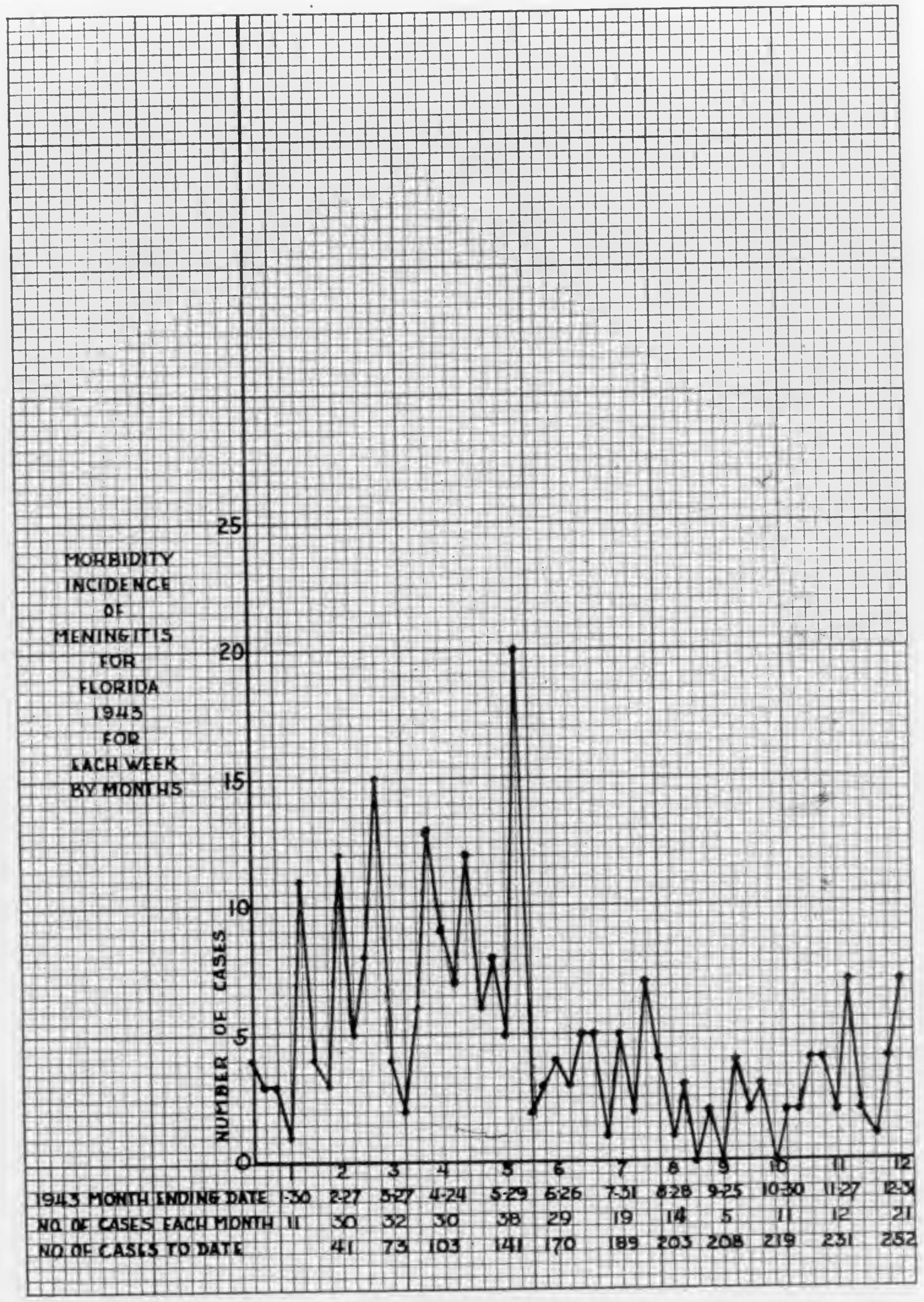
SEX	Male	Female	Not Given
No. of Cases	22	121	1

COLOR	White	Colored	Not Given
No. of Cases	133	8	3

MORBIDITY INCIDENCE OF MENINGITIS FOR FLORIDA BY COUNTIES—1943.



Spot Map 2



1943 MONTH ENDING DATE	1-30	2-27	3-27	4-24	5-29	6-26	7-31	8-28	9-25	10-30	11-27	12-31
NO. OF CASES EACH MONTH	11	30	32	30	38	29	19	14	5	11	12	21
NO. OF CASES TO DATE		41	73	103	141	170	189	203	208	219	231	252

Line Graph 2

and first and second grade children frequently have merely a headache with nausea and slight vomiting. The older grade children have headache, nausea, vomiting, backache, constipation, abdominal pain, nose bleed and varing degrees of jaundice developing in 5 to 10 days following the onset of symptoms. Adults usually have severe headache and joint pains in addition to the above symptoms and are prostrated due to the severity of symptoms.

LEPROSY

Only one case of leprosy was reported for 1943. One case of leprosy from Florida was released from the Leprosarium at Carville as noncommunicable to be kept under survelliance. Modern methods of leprosy treatment have improved to the extent of making such releases possible.

MENINGITIS

There were 252 cases of epidemic meningitis reported to this Bureau in 1943 as compared to 25 in 1942 and 27 in 1941. Only 73 epidemiological case reports were submitted to this Bureau. Most of the cases reported were from armed force stations and the reports submitted revealed the beneficial results of the administration of sulfa drugs by the high percentage of recovery in these cases.

Tables 6, 7, 8, 9, and 15 show the statistical morbidity and mortality figures for meningitis.

MYCOSIS

No cases of actinomycosis, blastomycosis or favus have ever been reported in Florida. However a recent 10 year study of death certificates reveal that there have been 14 deaths reported as being due to actinomycosis; 9 due to blastomycosis; one death due to actinomycosis occurred in 1942. These three diseases were added to the list of reportable diseases in this state in 1942 and morbidity as well as mortality incidence of this disease should be reported.

Mortality incidence of these infections by years will be found in tables G and H.

TABLE G

Deaths in Florida Due to Actinomycosis

By Age, Color and Sex

From 1923 - 1942

County	Cert. No.	Disease	Age	Color	Sex	Year
Dade	12782	Due to Actinomycosis (liver abscess)	58	White	M	1942
Dade	13254	Actinomycosis of left shoulder.	48	"	M	1940
Dade	20491	Actinomycosis (Left Renol Abscess)	20	"	M	1940
Orange	14461	Actinomycosis of lung with secondary Bro. Pneumonia	59	"	M	1940
Gadsden	2112	Actinomycosis (right lung)	70	"	M	1939
Duval	15595	Pneumonia Actinomycosis	27	"	M	1938
Pinellas	18447	Actinomycosis of lungs	38	"	M	1938
Palm Beach	19681	Actinomycosis	51	"	M	1933
Duval	16674	Actinomycosis	55	"	F	1932
Leon	982	Actinomycosis of the chest wall and lung.	?	"	F	1932
Pinellas	12962	Actinomycosis of the right hip and shoulder.	64	"	M	1931
Dade	10570	Actinomycosis of right lower jaw.	34	"	M	1930
Dade	5615	Actinomycosis	11	"	M	1928
Polk	10005	Actinomycosis of left lung.	32	"	F	1924

TABLE H

Deaths in Florida Due to Blastomycosis

By Age, Color and Sex

From 1923 - 1942

County	Cert. No.	Disease	Age	Color	Sex	Year
Hillsboro	4473	Blastomycosis		White		1927
Hillsboro	904	Blastomycosis		"		1927
Pinellas	15801	Blastomycosis		"		1932
Pinellas	2974	Blastomycosis, Pulmonary		"		1932
Palm Beach	19681	Blastomycosis		"		1933
Lake	19380	Blastomycosis (Lungs)		"		1933
Palm Beach	21198	Blastomycosis, Staphylococci-P Pulmonary		"		1934
Palm Beach	21999	Blastomycosis, Pulmonary		"		1939
Dixie	5800	Blastomycosis		Colored		1940

TABLE I—MORBIDITY INCIDENCE OF DYSENTERY BY COUNTIES FOR FLORIDA 1934-1943

County	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Alachua	0	0	0	0	0	0	0	0	0	1
Baker	0	0	0	1	0	0	0	0	1	0
Bay	0	0	0	0	1	0	1	0	0	4
Bradford	0	0	0	0	0	0	0	0	0	0
Brevard	0	0	0	0	1	0	0	0	0	1
Broward	3	0	0	0	0	0	0	0	0	1
Calhoun	0	0	0	0	0	0	0	0	0	0
Charlotte	0	0	0	0	1	0	0	0	0	0
Citrus	0	0	0	0	0	0	0	0	0	0
Clay	0	0	0	0	0	0	0	1	0	0
Collier	0	0	0	0	0	0	0	0	0	0
Columbia	0	0	0	0	0	0	2	0	0	0
Dade	5	7	20	28	14	13	14	8	7	151
DeSoto	0	0	0	0	0	0	0	0	0	0
Dixie	0	0	0	0	0	0	0	0	0	0
Duval	10	0	5	12	31	4	7	3	15	9
Escambia	0	0	0	0	2	0	0	0	0	1
Flagler	0	0	0	0	0	0	0	0	0	0
Franklin	0	0	0	0	4	1	0	0	0	1
Gadsden	17	0	0	0	0	36	18	25	15	100
Gilchrist	0	0	0	0	0	0	0	0	0	0
Glades	0	0	0	0	0	0	0	0	1	0
Gulf	0	0	0	0	2	1	0	0	0	0
Hamilton	0	0	0	0	0	0	0	1	0	0
Hardee	0	0	0	0	1	0	0	0	0	0
Hendry	0	0	0	0	0	0	0	0	0	0
Hernando	0	0	0	0	0	0	0	0	0	0
Highlands	0	0	0	0	0	0	0	0	0	2
Hillsborough	0	1	0	0	1	0	2	1	0	8
Holmes	0	0	0	0	0	0	0	0	0	0
Indian River	0	0	0	0	0	0	0	0	0	0
Jackson	0	0	0	0	1	0	0	0	0	0
Jefferson	0	0	0	0	0	0	0	0	0	0
Lafayette	0	0	0	0	0	0	0	0	0	0
Lake	0	0	0	0	0	0	0	3	1	5
Lee	0	0	0	0	0	0	0	0	0	0
Leon	0	0	0	0	0	0	0	0	18	0
Levy	0	0	0	0	0	0	0	0	0	0
Liberty	0	0	0	0	0	0	0	0	0	0
Madison	0	0	1	0	0	0	0	0	0	0
Manatee	0	0	0	0	0	0	0	0	0	0
Marion	0	0	2	0	0	1	0	0	0	0
Martin	0	0	0	0	0	0	0	0	0	1
Monroe	0	0	0	0	0	0	0	0	0	0
Nassau	0	0	0	0	0	0	0	0	9	2
Okaloosa	0	0	0	0	0	0	0	0	0	3
Okeechobee	0	0	0	0	0	0	0	0	0	0
Orange	0	4	0	0	0	2	0	11	1	6
Osceola	0	0	0	0	0	0	0	0	0	0
Palm Beach	0	2	0	0	1	0	0	0	1	3
Pasco	0	0	0	0	0	0	0	1	0	0
Pinellas	2	0	0	0	3	0	0	1	1	0
Polk	1	4	0	0	0	0	0	1	0	1
Putnam	3	0	0	0	0	0	0	0	0	0
St. Johns	0	0	0	0	0	0	0	0	0	0
St. Lucie	0	0	0	0	0	0	0	0	0	0
Santa Rosa	0	0	0	0	0	0	0	0	0	0
Sarasota	0	0	0	0	1	0	0	1	0	0
Seminole	0	0	0	0	0	0	0	0	0	0
Sumter	0	0	0	0	0	0	0	0	0	0
Suwannee	0	0	0	0	0	1	0	0	0	0
Taylor	0	0	0	0	0	0	0	0	0	0
Union	0	0	0	0	0	0	0	0	0	1
Volusia	0	1	2	4	0	0	0	0	0	4
Wakulla	0	0	0	0	1	0	0	0	0	0
Walton	0	0	0	0	2	0	0	0	0	7
Washington	0	0	0	0	0	0	0	0	0	0
TOTAL	41	19	30	45	67	59	44	57	70	312

PARATYPHOID FEVER AND SALMONELLA INFECTIONS

A total of 31 cases of salmonella infections were reported during 1943. Only 9 case records were received by this Bureau. Eleven salmonella carriers were found during the year. Several of these were found as a result of routine physical check up on food handlers.

More and more interest in the salmonella infections causing dysentery is being stimulated. Reports on the recent research done at the central laboratory of the Florida State Board of Health and elsewhere have been sent out to each county health department and are available to any private practicing physician or public health worker. Two of these publications now available are "Varieties of Salmonella Isolated in Florida During 1942" by Mildred M. Galton, SC.M., and Alice Lee Quan, M.S., and "The Salmonella Group With Special Reference to the Species Found in Florida During 1942" by the same authors.

POLIOMYELITIS

During 1943 there were only 28 sporadic cases of poliomyelitis reported as compared to 43 in 1942 and 263 in the epidemic year of 1941. Only 12 epidemiological case reports were received this year. There were 4 deaths in 1942 as compared to 34 in 1941.

Spot Map 3 for 1943 shows a general distribution of sporadic poliomyelitis cases throughout the year. In 1941 the epidemic incidence of poliomyelitis occurred in the more populated areas of Florida.

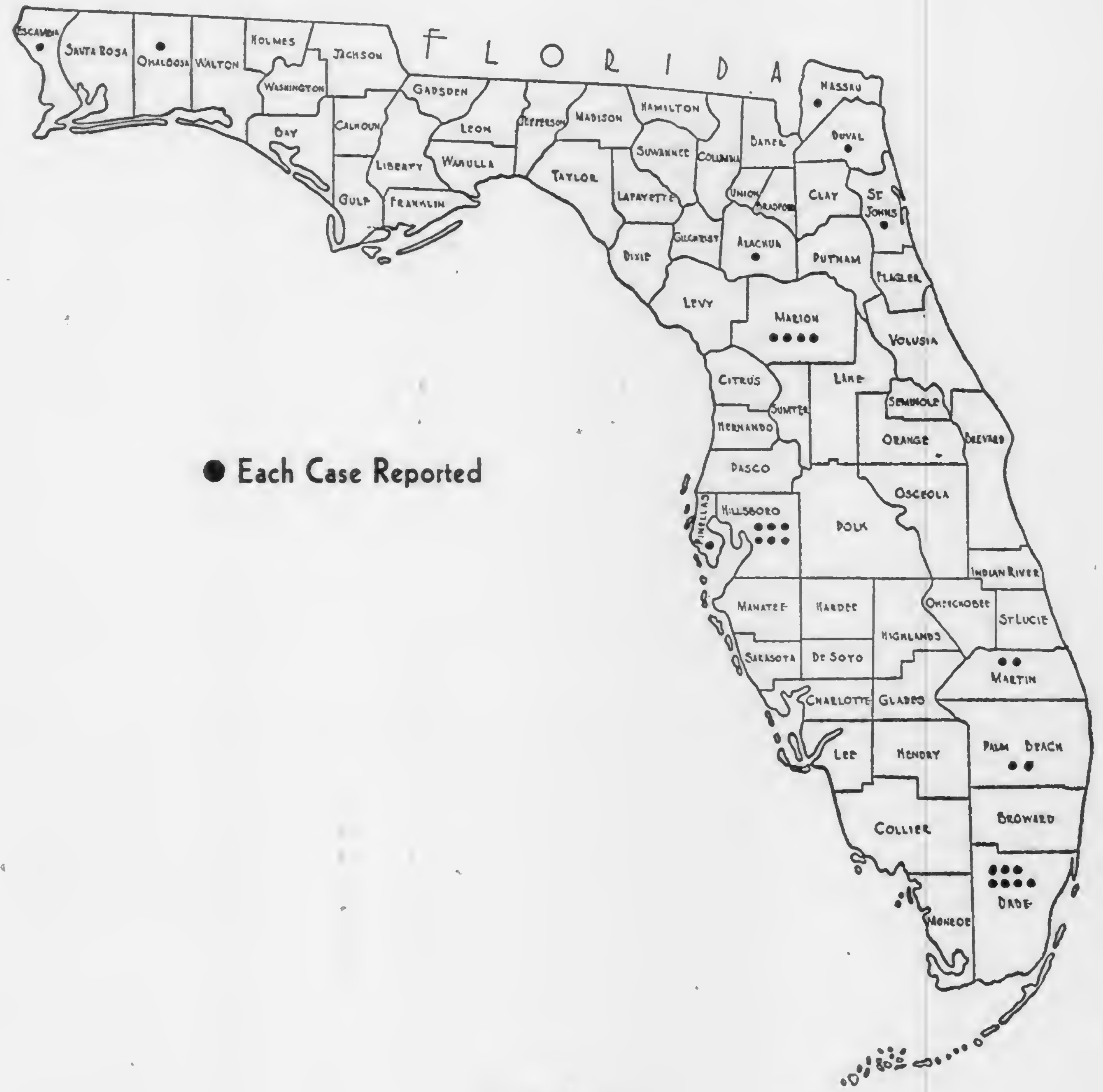
Line Graph 3 shows a general distribution of sporadic cases throughout the year with slight accentuation of incidence during September as compared to the epidemic year of 1941 in which there was a gradual increase in the number of cases reported beginning with one case the first week in January and reaching a peak of 27 cases in October after which there was a gradual decline in the number of cases reported, none being reported for the last week in December, 1943.

The morbidity and mortality statistics of poliomyelitis will be found in tables 6, 7, 8, 9 and 25.

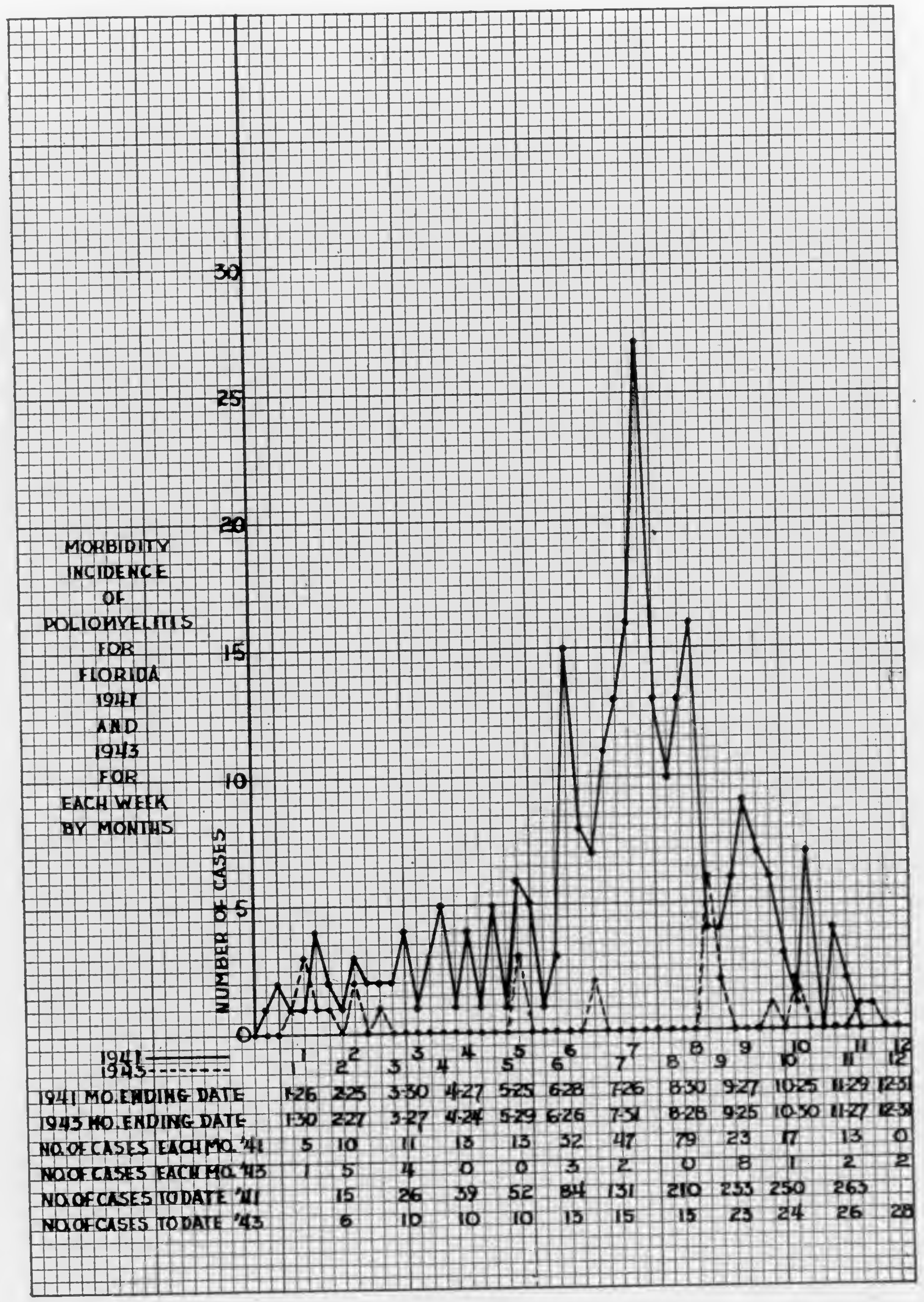
PSITTACOSIS

No cases of psittacosis were reported for 1943. Although an effort was made to have the regulation of the Florida State Sanitary Code, pertaining to the control of psittacine birds rescinded. The State Board of Health in executive session on January 16, 1944, discussed the regulation and concluded that it would not be in the

MORBIDITY INCIDENCE OF POLIOMYELITIS FOR FLORIDA BY COUNTIES—1943.



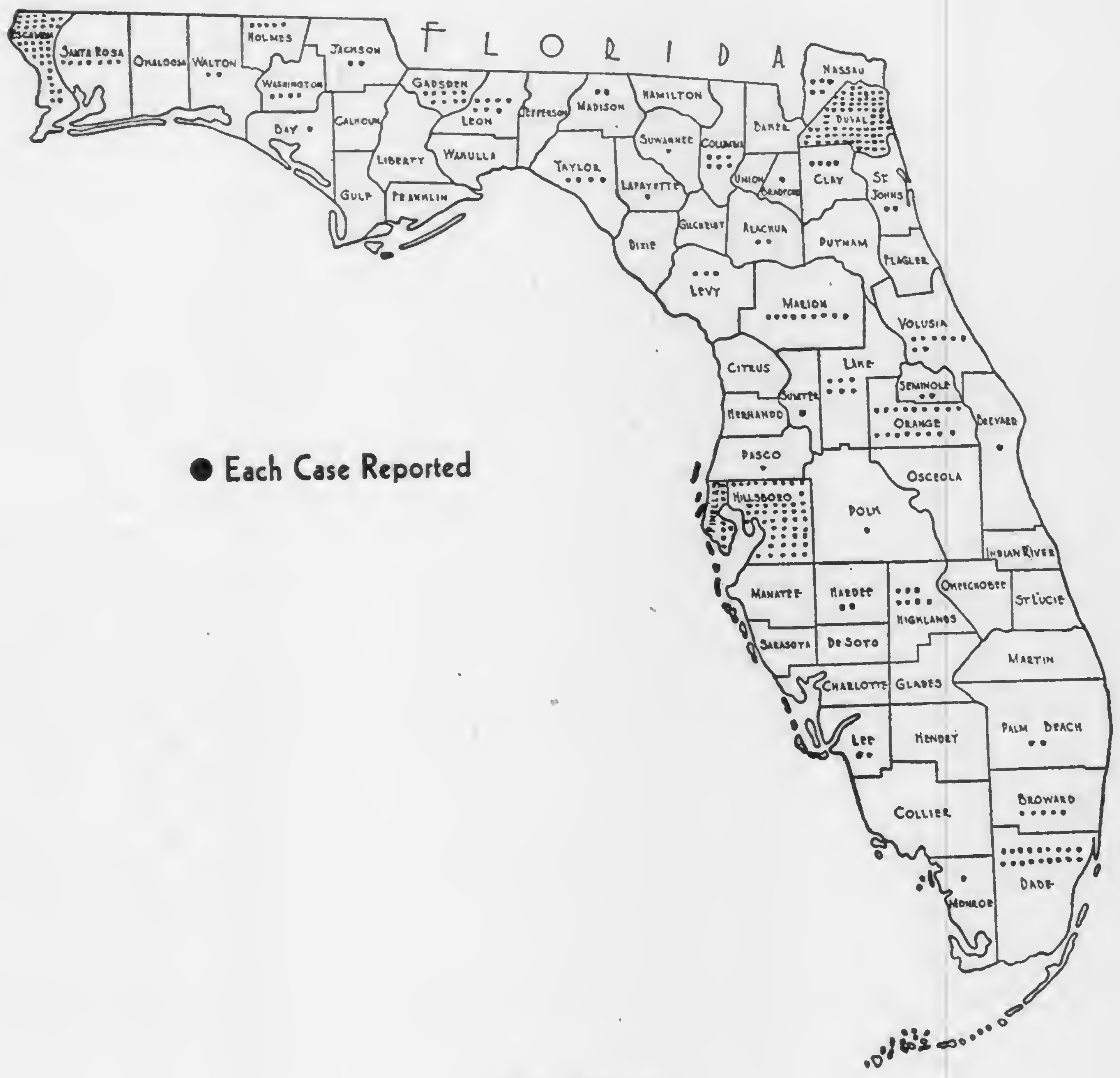
Spot Map 3



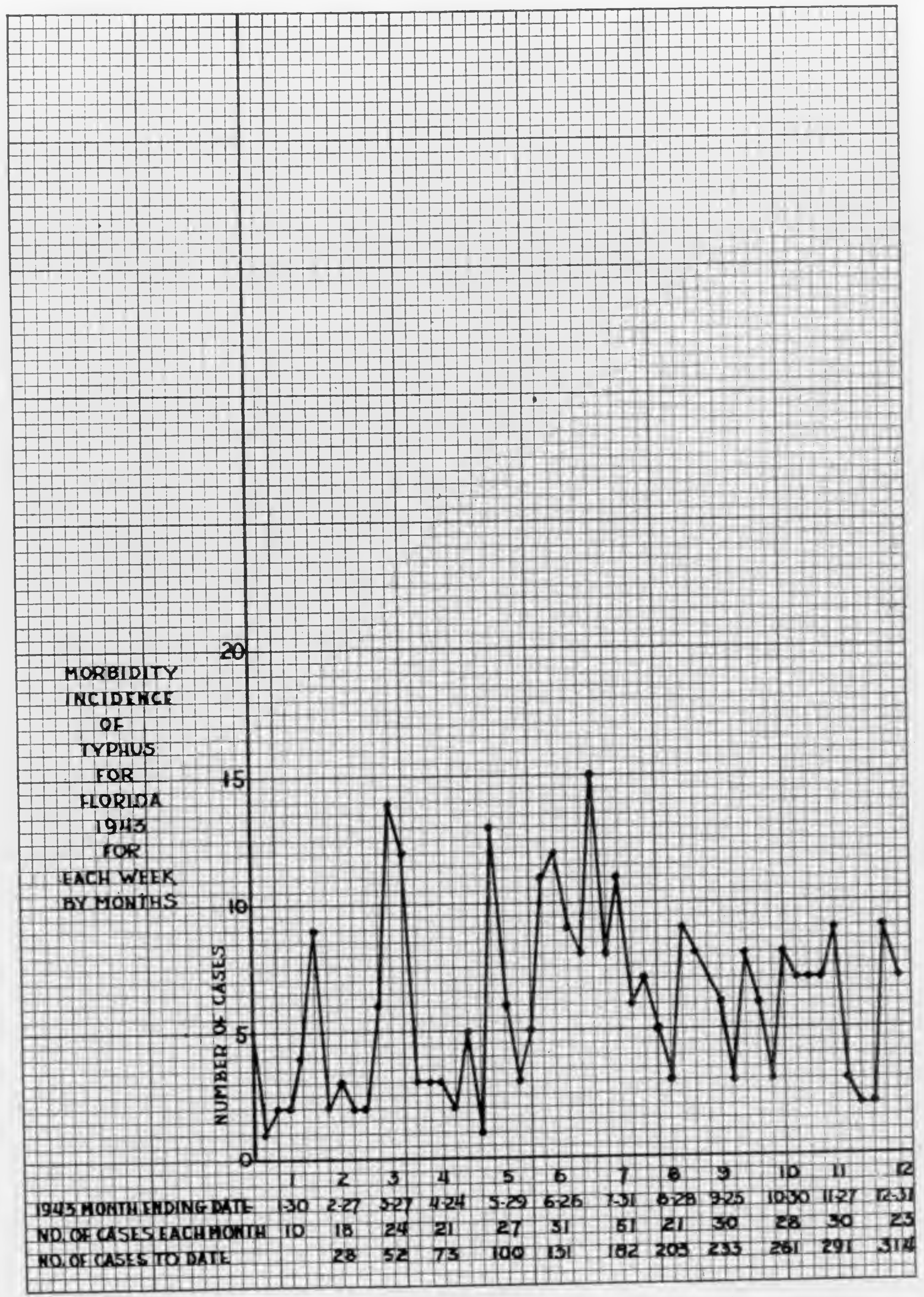
	1	2	3	4	5	6	7	8	9	10	11	12
1941 MO. ENDING DATE	1-26	2-25	3-30	4-27	5-25	6-28	7-26	8-30	9-27	10-25	11-29	12-31
1943 MO. ENDING DATE	1-30	2-27	3-27	4-24	5-29	6-26	7-31	8-28	9-25	10-30	11-27	12-31
NO. OF CASES EACH MO. '41	5	10	11	13	13	32	47	79	23	17	13	0
NO. OF CASES EACH MO. '43	1	5	4	0	0	3	2	0	8	1	2	2
NO. OF CASES TO DATE '41		15	26	39	52	84	131	210	233	250	263	
NO. OF CASES TO DATE '43		6	10	10	10	13	15	15	23	24	26	28

Line Graph 3

MORBIDITY INCIDENCE OF TYPHUS FEVER FOR FLORIDA BY COUNTIES—1943.



Spot Map 4



1943 MONTH ENDING DATE	1-30	2-27	3-27	4-24	5-29	6-26	7-31	8-28	9-25	10-30	11-27	12-31
NO. OF CASES EACH MONTH	10	18	24	21	27	31	51	21	30	28	30	23
NO. OF CASES TO DATE		28	52	73	100	131	182	203	233	261	291	314

Line Graph 4

promotion of the best interests of public health to modify the present regulation. The final factor in this decision was the recent development of several cases of psittacosis in this section of the country. This particular situation seemed to be one where the interest of a small group had to be sacrificed to the protection of the general public.

TYPHUS FEVER (Brills)

There were 314 cases of endemic typhus in 1943 as compared to 313 in 1942; 196 in 1941 and a 5 year mean of 179 cases.

The gradual increase of typhus emphasizes the need of a more definite rat control program through the Bureau of Sanitary Engineering.

At present rat control programs are being conducted at various points throughout the state by the Sanitation Division of the United States Public Health Service. The progress of this work is hampered by the scarcity of materials and labor shortage.

The Bureau recommends that a definite rat control program as a post-war activity be established and properly personneled in the Bureau of Sanitary Engineering. Figures showing the morbidity and mortality statistics for typhus fever for 1943 and the past years will be found in tables 6, 7, 8, 9 and 27.

Spot Map 4 shows a general distribution of this disease throughout the state with the greatest incidence in the more populated areas.

Line Graph 4 shows a continued incidence of typhus throughout the year with but slight increase in the incidence during the spring months.

SCARLET FEVER

There were 365 cases of scarlet fever reported for Florida in 1943 as compared to 281 cases in 1942, 205 in 1941 and a 5 year mean of 301. Only 2 deaths, one white and one colored were reported for scarlet fever in 1942. The low mortality incidence may be attributed to the relative mildness of the disease in warmer climates.

Spot Map 5 on scarlet fever shows the incidence of this disease having occurred largely in the more populated areas in the state.

Line Graph 5 shows the scarlet fever incidence as having been low during June, July, August and September with a gradual rise in October, November and with its peak in December and January and again a gradual fall in incidence in February, March and April.

Morbidity and mortality data relative to scarlet fever will be found in tables 6, 7, 8, 9, and 16.

SMALLPOX

Only 2 cases of smallpox were reported during 1943. Both of these individuals died. A total of 32,068 smallpox vaccinations were reported for Florida. Of this number, 30,120 were reported by organized county health departments, and 1,948 by counties without organized county health department services.

TYPHOID FEVER

During the year 1943 a total of 68 cases of typhoid fever were reported in Florida as compared to 196 cases in 1942, and 166 cases in 1941. The 5 year mean being 152 cases. A total of 51,762 typhoid immunizations were reported from all the counties in Florida. Of this number, 49,042 were reported from organized county health departments and 2,720 from counties without organized health department services. Only 39 epidemiological case records were received. Forty-one typhoid bacilli carriers are now recorded with the Bureau of Epidemiology. Seventeen of these were found in 1940 and 41. Fifteen in 1942 and nine in 1943.

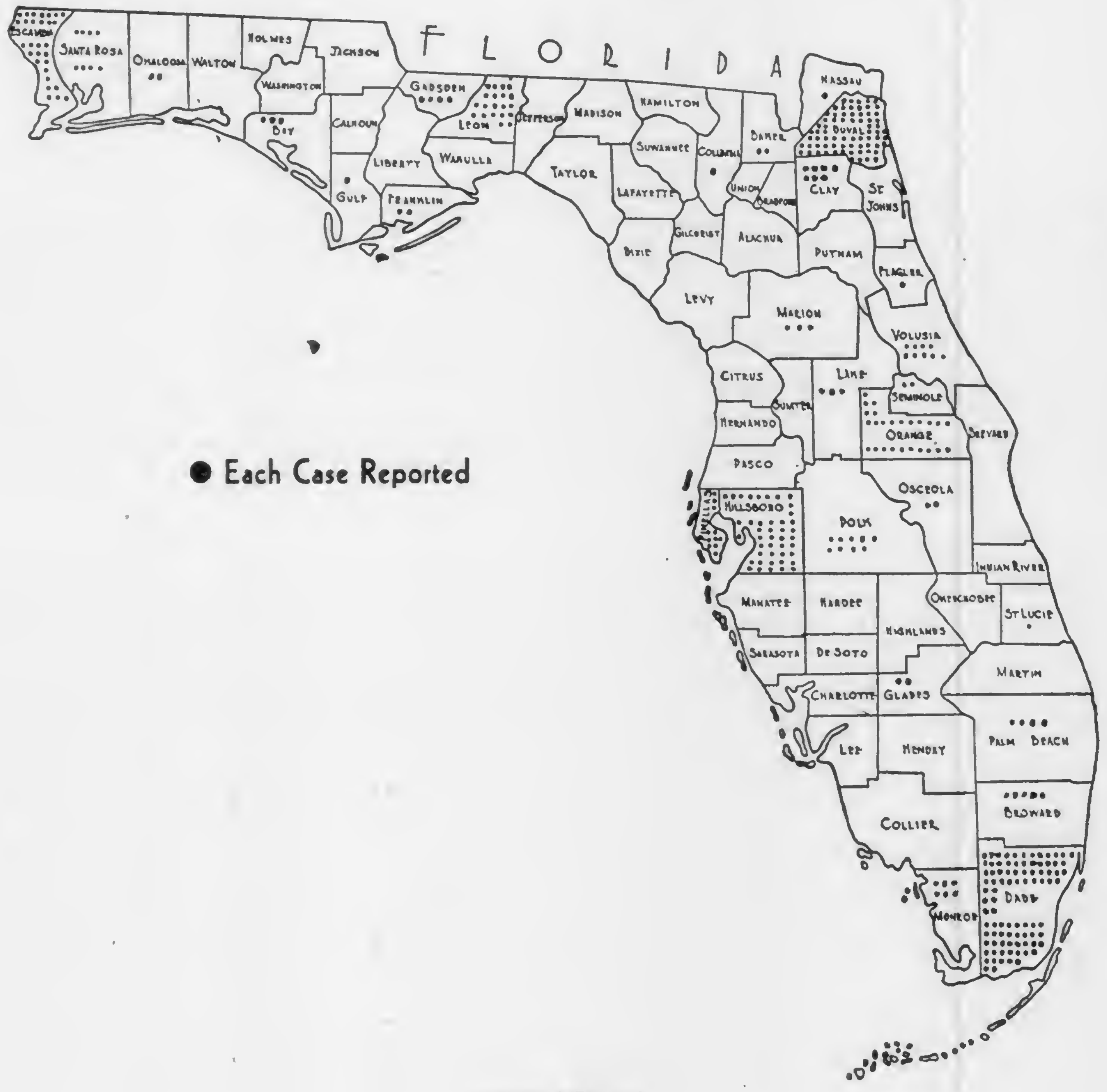
Four of the carriers found during 1943 were found in the routine examination for health certification. One of these was a shellfish worker at Apalachicola and another a woman at Niceville who was conducting a combination tavern and restaurant. Three carriers were found in routine epidemiological study of current typhoid cases.

TYPHOID OUTBREAK ON ALACHUA COUNTY FARM

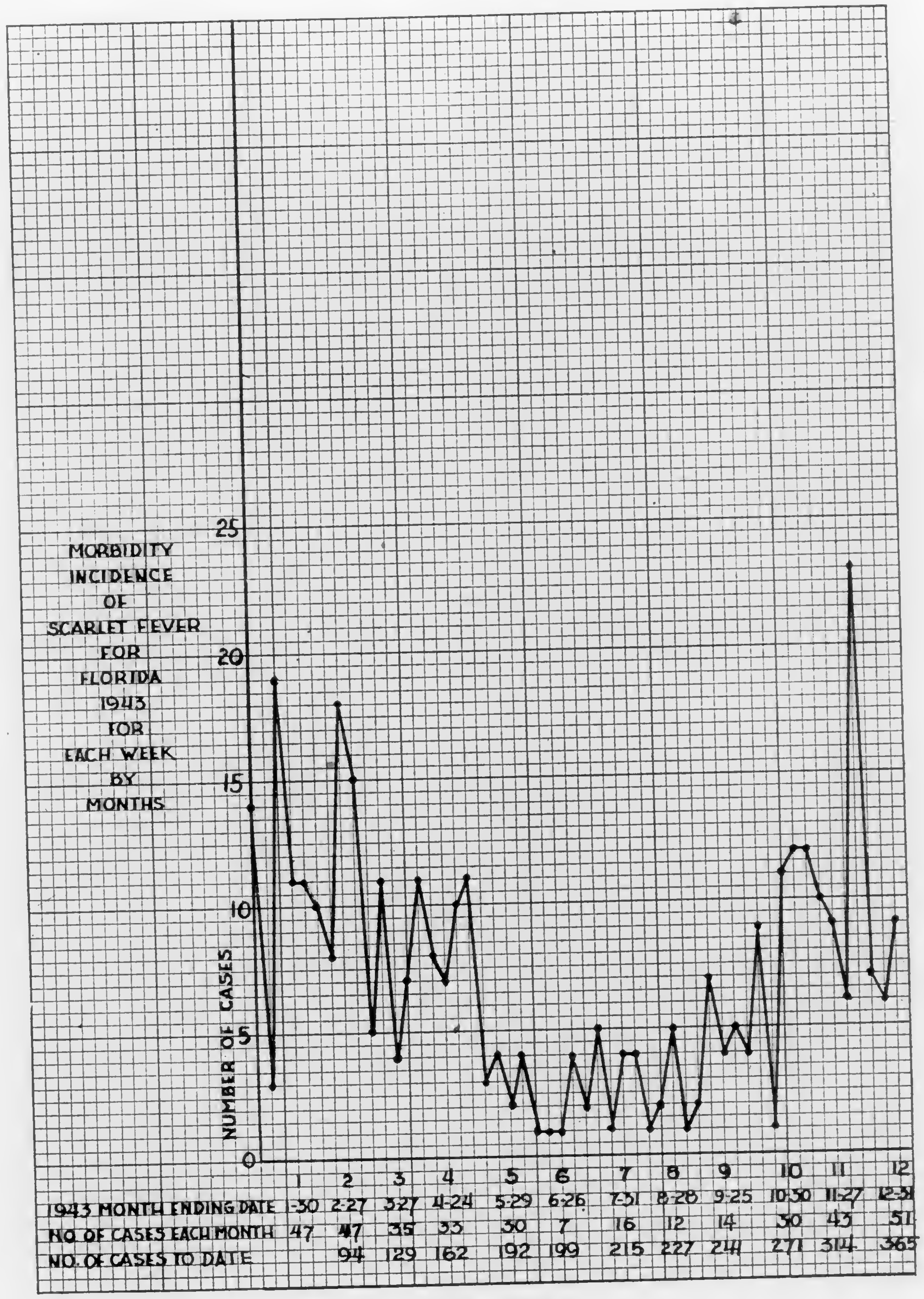
In April and May of 1943, Dr. M. H. DePass of Gainesville, reported three colored children, Willie James Robinson, age 5; Sam Robinson, age 6 and Ethel Mae Robinson, age 8, grandchildren of Ada Jenkins Robinson, as having typhoid fever. These cases were children of colored employees on the W. J. Whitehurst Farm at Archer, Florida. Mr. Whitehurst was then one of the commissioners of Alachua County. At the request of Dr. DePass and with the consent of Mr. Whitehurst, an investigation was made by Dr. E. F. Hoffman and Mrs. L. Tucker, R. N., County nurse of Alachua County.

Typhoid cultures were made on all the immediate contacts and revealed that Ada Jenkins Robinson, age 60, who gave a history of having typhoid about 40 years ago, is a typhoid carrier. In as much as these cases were confined to this one farm, an emergency typhoid immunization clinic was set up and all the employees and their families were inoculated against typhoid fever.

MORBIDITY INCIDENCE OF SCARLET FEVER FOR FLORIDA BY COUNTIES—1943.



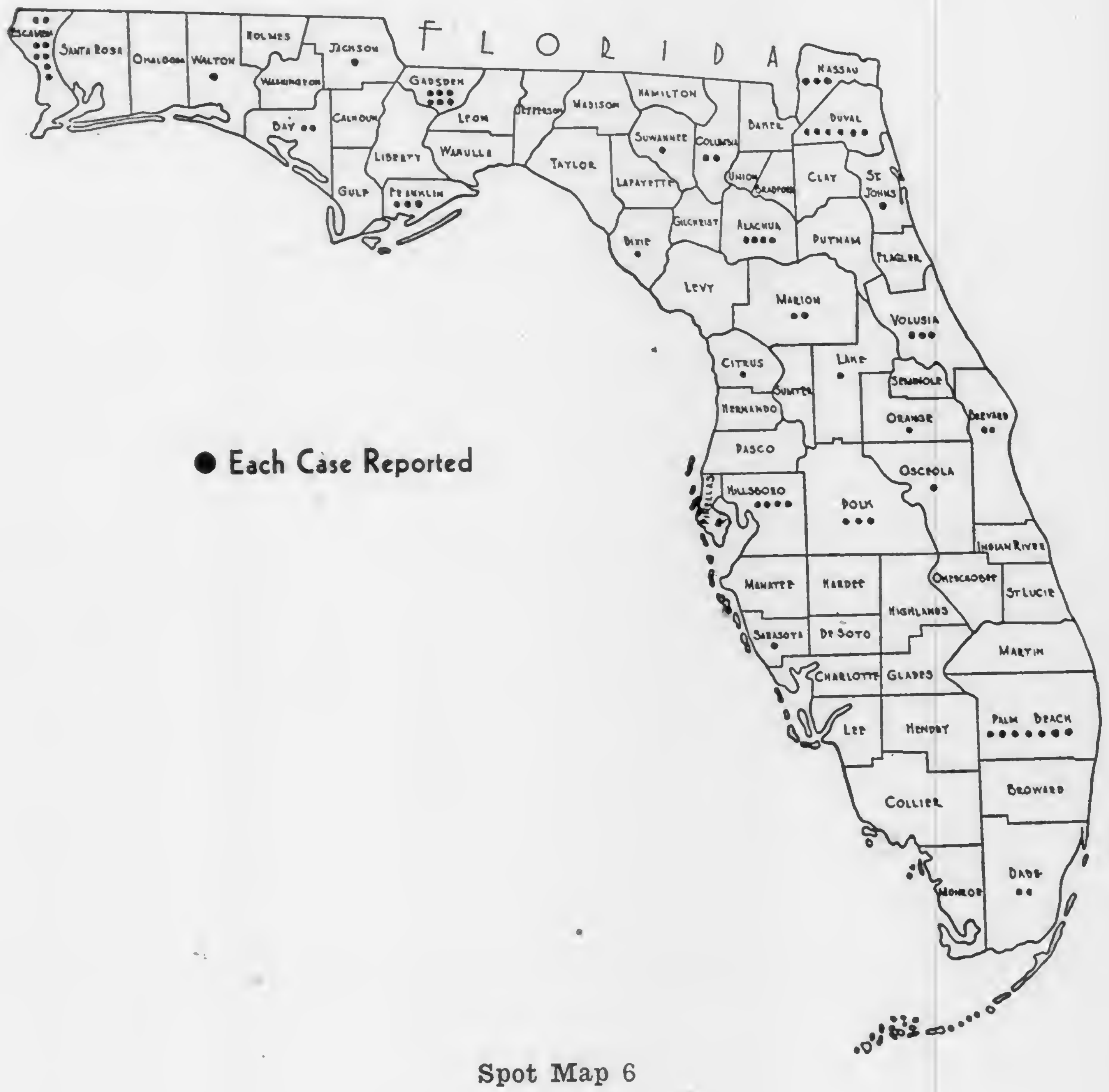
Spot Map 5



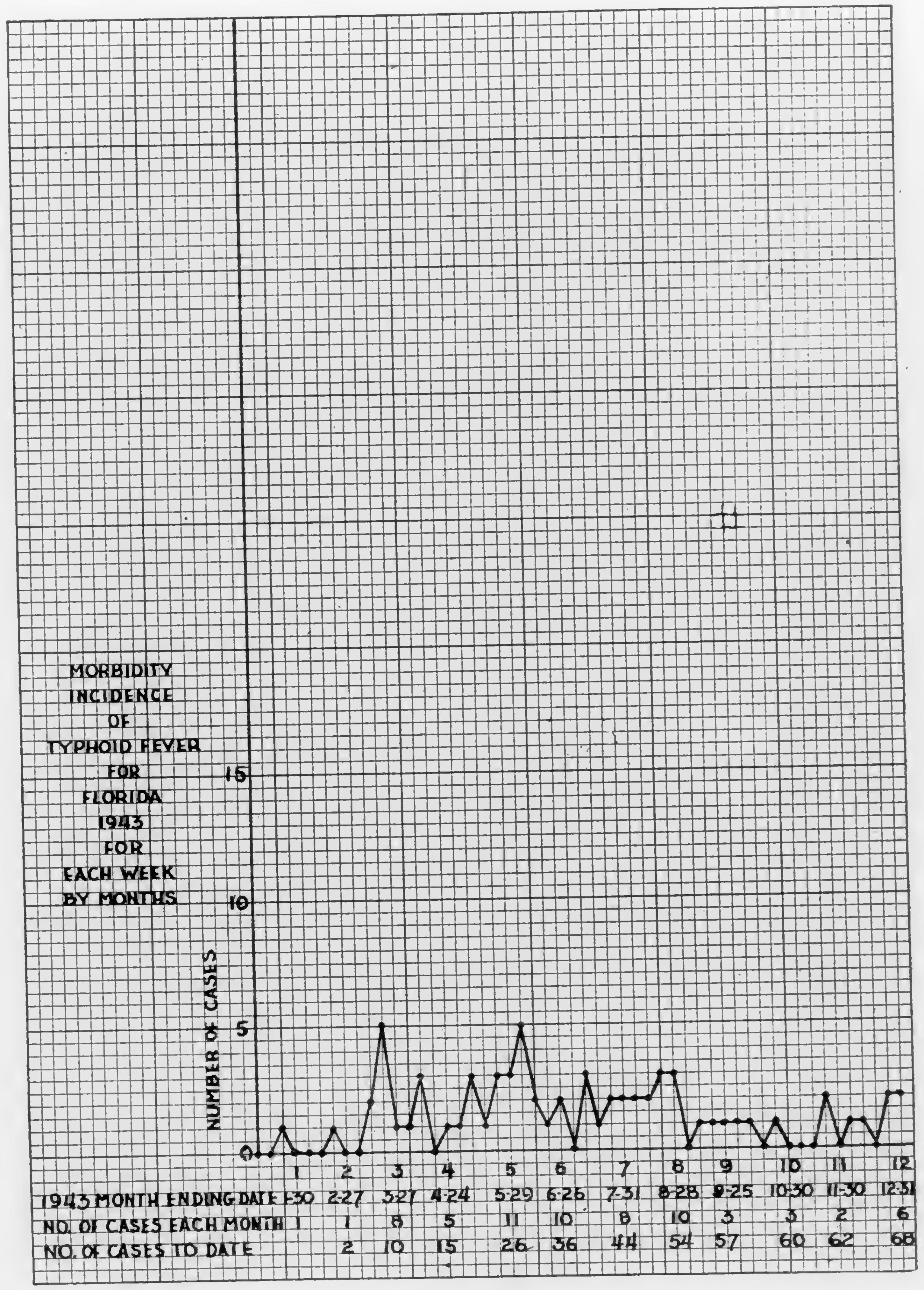
1943 MONTH ENDING DATE	1-30	2-27	3-27	4-24	5-29	6-26	7-31	8-28	9-25	10-30	11-27	12-31
NO OF CASES EACH MONTH	47	47	35	33	30	7	16	12	14	30	43	51
NO. OF CASES TO DATE		94	129	162	192	199	215	227	241	271	314	365

Line Graph 5

MORBIDITY INCIDENCE OF TYPHOID FEVER FOR FLORIDA BY COUNTIES—1943.



Spot Map 6



Line Graph 6

TYPHOID OUTBREAK IN FRANKLIN COUNTY

In August of 1943, Dr. Ruben Rathkind of Carabelle, Florida, reported three cases of typhoid fever in the persons of Alice Marie Goff, age 2 and Bette Jean Goff, age 4, and Janette Goff, age 6. Investigation through the Franklin-Gulf-Wakulla Health Department revealed that Mrs. J. B. (Ollie) Williams, age 50, the grandmother, who came from Cross City, Florida, to live at the children's home then at Wewahitchka, Florida, Gulf County, was a carrier and apparently the source of the children's infection. Alice Marie Goff, age 2, later expired at Thomasville, Georgia, on August 20, 1943, from parotitis bilateral pneumonia and typhoid arthritis of the spine.

It will be noted from Spot Map 6 that typhoid is endemic throughout the state. The numerous small outbreaks occur largely as a result of our typhoid residual in typhoid carriers. Typhoid carriers for the most part in Florida are either the result of typhoid epidemics of years past in this state; or are elderly individuals found as typhoid carriers in other states who take up winter residence here in Florida annually or who have retired in this state.

The finding and keeping under survelliance of these individuals should help considerably in keeping down the incidence of typhoid fever.

WHOOPING COUGH

A total of 1,134 cases of whooping cough were reported during 1943 as compared to 828 in 1942 and 747 in 1941. The last 5 years show a mean of 799 cases. There were 47 deaths reported as being due to whooping cough. These deaths undoubtably could have been prevented with the consistent use of pertussis vaccine, in the infant and preschool child. Efforts are being made for the free distribution and administration of pertussis vaccine by private and clinic physicians to children whose parents are unable to buy the prophylatic treatment.

INTESTINAL PARASITES

HOOKWORM

Hookworm still remains our greatest intestinal parasite problem. In 1943 there were 6,887 cases reported as compared with 10,745 in 1942 and 7,944 in 1941. A total of 8,231 hookworm treatments were reported given in Florida during the year. Of this number 8,079 were reported given by organized county health departments and 154 by counties without organized county health department services. Several counties did not report. Closer checking of morbidity reports is now eliminating duplicate reports. Although most of the cases reported are being treated for their infestation, the war effort has curtailed the sanitating of the homes of the infested families.

OTHER INFESTATIONS

Other intestinal parasite infestations reported were ascariasis 390, oxyuriasis 52, trichuriasis 58 and tapeworm 17.

FISH TAPEWORM

Of the 17 cases of tapeworm reported eight were of the broad fish tapeworm variety (Diphyllobothruim latune). These were discovered during a routine survey among negro children in the region of Monticello, Florida, Jefferson, County. A pet dog of the one of the cases was also found harboring this parasite. All of these cases are undoubtedly of local origin as the result of eating uncooked fish.

GIARDIASIS

A new interest has developed in the intestinal parasitic infestation known as giardiasis which is caused by an organism known as giardia lamblia.

Faust states, "Giardiasis is a relatively common infection of childhood and is especially prevalent in institutionalized homes in the Southern United States. From two thirds to three fourths of the patients are spontaneously freed of the organism during adolescence, while the remaining infections tend to persist.

Giardia parasitizes the cuticular surface of the mucosa at the level of the duodenum and upper half of the jejunum. It is probably capable of entering the common bile duct and becoming an inhabitant of the lumen of the gallbladder. It is not known to invade the intestinal mucosa, but in myriad numbers may be conceivable cause of sufficient irritation of the surface of the duodenum to produce a chronic catarrhal condition, with colicky pains in the duodenum and a loose mucous diarrhea.

Until recently no satisfactory treatment has been available, but since 1937 there has been increasing literature on the high efficiency of atabrine in the elimination of Giardia. THE DRUG IS ADMINISTERED AS IN MALARIA, O. I. Gm. (1½ grains) THREE TIMES DAILY BEFORE MEALS FOR FIVE DAYS, WITH REDUCED DOSAGE FOR CHILDREN.

While other acridine preparations including acranil have more recently been advocated and are reported to have specific action, it may be stated that atabrine constitutes at least one efficient giardicidal drug."

Sixteen cases of giardiasis were reported in 1943 and it is felt that more complete reporting of this disease will reveal an even greater morbidity incidence.

RECOMMENDATIONS FOR THE NEW YEAR

1. A more comprehensive program with better understanding, more complete reporting, thorough epidemiological study, and follow up of all cases and an all inclusive immunization program with contributions to research and the compilation and presentation of usable morbidity statistics.

2. The appointment of an assistant collaborating epidemiologist in every county of the State to be responsible for all local activities pertaining to the reporting, prevention and control of all reportable diseases.

3. The introduction of a general State Board of Health Certificate of Compliance with the Florida State Sanitary Code, acceptable to the various state boards and commissions requiring health certification. This certificate to be issued by the Florida State Health Officer or his local representative, on the basis of a physical check-up by a qualified physician, to mid-wives, foodhandlers, students, domestics, teachers, barbers, masseurs, beauty culturists and any other persons who because of State law or otherwise are required to present a certificate of health for purposes of travel, attendance at or visits to institutions or for employment or participation in any other vocation or avocation.

4. The provision of pertussis vaccine for free distribution and administration by county health departments or private physicians to individuals who are unable to purchase this treatment for their children.

5. The establishment of a year around immunization and hookworm treatment with other school health services as a part of a general maternal and child health service in every county in Florida.

6. The extension of the present University of Florida, General Extension Course in Public Health, Epidemiology I, now being given to sanitarians, to all personnel members of health departments with the assistance of county health directors who are qualified.

7. The employment of a full time filing clerk to be responsible for the cross checking, and filing of all morbidity statistics and for the proper reporting and disposition of all laboratory reports.

8. The development and introduction of an I.B.M. morbidity punch card to facilitate the study and analysis of statistical data.

9. The employment of a full time clerk for distributing insulin, issuing health certificates and filling orders for epidemiological supplies in general.

10. The employment of a full time assistant to the director to assist with the epidemiological investigations of unusual outbreaks or epidemics of reportable diseases and make and submit studies of the morbidity reports received for the state by the Bureau of Epidemiology.

TABLE 1.—SUMMARY OF COMMUNICABLE DISEASE EPIDEMIOLOGICAL FOLLOW UP BY COUNTIES—1943.

COUNTY	Diphtheria				Dysentery				Encephalitis				Leprosy				Meningitis				Paratyphoid				Poliomyelitis				Typhus				Scarlet Fever			
*	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3
Alachua	3	3	0	0	1	1	0	0									1	1	0	0					1	0	0	1	2	0	0	2				
Baker	4	4	0	0																													2	2	0	0
Bay	2	2	0	0	4	0	0	4																					1	1	0	0	5	4	0	1
Bradford	2	2	0	0																									1	1	0	0				
Brevard					1	0	0	1																					1	0	1	0				
Broward	3	0	2	1	1	0	0	1									5	1	0	4	2	1	0	1					5	0	0	5	5	4	1	0
Calhoun																																				
Charlotte																																				
Citrus																					1	0	0	1												
Clay													1	0	0	1	46	17	0	28									4	1	0	3	7	3	1	3
Collier																																				
Columbia	1	1	0	0													1	1	0	0									6	0	2	4	1	0	0	1
Dade	6	0	0	6	151	0	0	151	12	0	0	12					39	0	0	39	6	0	0	6	7	0	0	7	18	0	0	18	87	0	0	87
DeSoto																																				
Dixie																																				
Duval	65	0	0	65	9	0	0	9	1	0	0	1					47	0	0	47	2	0	0	2	1	0	0	1	72	0	0	72	70	0	0	70
Escambia	33	12	0	21	1	1	0	0									13	8	0	5					1	1	0	0	37	30	0	7	29	15	0	14
Flagler																																	1	0	0	1
Franklin					1	0	0	1									8	8	0	0													2	2	0	0
Gadsden	3	3	0	0	100	0	82	18									6	0	0	6									9	7	0	2	4	4	0	0
Gilchrist																																				
Glades	1	0	0	1																													2	0	0	2
Gulf																																	1	1	0	0
Hamilton																					1	0	0	1												
Hardee																													2	0	0	2				
Hendry																																				
Hernando																																				
Highlands	8	5	0	3	2	1	0	1									1	1	0	0	1	0	0	1					7	7	0	0				
Hillsborough	29	20	2	7	8	2	0	6									25	3	1	21					6	4	0	2	47	26	0	21	43	7	7	29
Holmes																													5	3	0	2	1	0	0	1
Indian River	2	0	1	1																																
Jackson																													2	0	0	2				
Jefferson	2	0	0	2																																
Lafayette																													1	0	0	1				

* T - Total; 1 - Complete Case Report; 2 - Incomplete Case Reports; 3 - No Case Reports.

TABLE 1.—SUMMARY OF COMMUNICABLE DISEASE EPIDEMIOLOGICAL FOLLOW UP BY COUNTIES—1943.—(Cont)

COUNTY	Diphtheria				Dysentery				Encephalitis				Leprosy				Meningitis				Paratyphoid				Poliomyelitis				Typhus				Scarlet Fever			
*	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3
Lake	4	4	0	0	5	0	0	5													4	1	2	1					6	5	0	1	3	3	0	0
Lee																													2	0	0	2				
Leon	5	0	0	5													3	1	0	2									7	2	0	5	20	2	3	15
Levy																													3	0	0	3				
Liberty																																				
Madison																													2	2	0	0				
Manatee	1	0	1	0																																
Marion	1	1	0	0																					4	2	2	0	9	2	0	7	3	2	0	1
Martin					1	0	0	1									3	0	0	3					2	0	0	2								
Monroe	3	2	1	0													1	0	0	1									1	1	0	0	6	6	0	0
Nassau	2	2	0	0	2	2	0	0													4	0	1	3	1	1	0	0	5	3	2	0	1	1	0	0
Okaloosa	9	7	1	1	3	0	0	3									4	0	4	0	1	0	1	0	1	0	0	1					2	0	1	1
Okeechobee																																				
Orange	6	6	0	0	6	5	0	1									11	1	4	6	4	1	0	3					17	7	3	7	25	11	9	5
Osceola	2	0	0	2																													2	0	0	2
Palm Beach					3	0	0	3	1	0	0	1					11	4	0	7					2	0	0	2	1	0	0	1	4	2	0	2
Pasco	2	2	0	0													2	1	0	1									1	0	0	1				
Pinellas	9	6	0	3													16	6	6	4					1	1	0	0	8	7	0	1	11	8	2	1
Polk	8	2	0	6	1	0	0	1									2	0	1	1									1	0	0	1	9	7	0	2
Putnam																																				
St. Johns	2	2	0	0													4	0	0	4					1	1	0	0	2	0	0	2				
St. Lucie																	1	0	0	1													1	0	0	1
Santa Rosa	5	3	0	2													2	2	0	0									7	6	0	1	8	4	0	4
Sarasota																																				
Seminole	2	0	0	2													1	0	0	1									2	0	0	2	2	0	0	2
Sumter																													1	1	0	0				
Suwannee	1	0	0	1													2	0	0	2									1	0	0	1				
Taylor	1	1	0	0																									4	1	0	3				
Union					1	1	0	0									1	0	0	1																
Volusia	12	8	0	4	4	1	0	3									1	1	0	0	4	2	0	2					8	2	1	5	9	7	0	2
Wakulla																	1	0	1	0																
Walton	4	0	0	4	7	0	0	7													1	0	0	1					2	0	0	2				
Washington																													4	0	0	4				

* T - Total; 1 - Complete Case Report; 2 - Incomplete Case Reports; 3 - No Case Reports.

TABLE 1.—SUMMARY OF COMMUNICABLE DISEASE EPIDEMIOLOGICAL FOLLOW UP BY COUNTIES—1943.—(Cont)

COUNTY	Sep. Sore Th.				Smallpox				Tetanus				Trichinosis				Tularemia				Typhoid				Undulant				Dengue				
*	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	
Alachua																					4	4	0	0									
Baker																																	
Bay																					2	2	0	0									
Bradford																																	
Brevard																					2	0	0	2	1	0	0	1					
Broward																									4	1	0	3					
Calhoun																																	
Charlotte																																	
Citrus																					1	1	0	0									
Clay																																	
Collier																																	
Columbia																					2	0	0	2									
Dade	21	0	0	21					12	0	0	12									2	0	0	2	6	0	0	6	1	0	0	1	
DeSoto																																	
Dixie																					1	1	0	0									
Duval	10	0	0	10					12	0	0	12									6	0	0	6	4	0	0	4					
Escambia																					8	7	0	1	2	2	0	0					
Flagler																									2	2	0	0					
Franklin																					3	3	0	0									
Gadsden	3	0	3	0									1	0	0	1	1	0	0	1	6	5	0	1	1	0	0	1					
Gilchrist																																	
Glades																																	
Gulf																																	
Hamilton																																	
Hardee																																	
Hendry																																	
Hernando																																	
Highlands																	1	0	0	1													
Hillsborough	1	0	0	1																	4	3	0	1									
Holmes					1	0	0	1																									
Indian River																																	
Jackson																					1	1	0	0	1	0	0	1					
Jefferson																																	
Lafayette																																	

* T - Total; 1 - Complete Case Report; 2 - Incomplete Case Reports; 3 - No Case Reports.

TABLE 1.—SUMMARY OF COMMUNICABLE DISEASE EPIDEMIOLOGICAL FOLLOW UP BY COUNTIES—1943.—(Cont)

COUNTY	Sep. Sore Th.				Smallpox				Tetanus				Trichinosis				Tularemia				Typhoid				Undulant				Dengue				
*	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	T	1	2	3	
Lake																					1	0	1	0									
Lee																																	
Leon																																	
Levy																																	
Liberty																																	
Madison																																	
Manatee																																	
Marion																					2	2	0	0	2	1	1	0					
Martin																																	
Monroe																													4	0	0	4	
Nassau																					3	3	0	0									
Okaloosa																																	
Okeechobee																																	
Orange					1	0	0	1													1	0	0	1									
Osceola																					1	0	0	1									
Palm Beach																					7	2	0	5	3	0	0	3					
Pasco																																	
Pinellas													1	1	0	0					1	1	0	0	8	5	3	0					
Polk																					3	0	0	3									
Putnam	1	0	0	1																													
St. Johns																					1	0	0	1									
St. Lucie																																	
Santa Rosa																																	
Sarasota																					1	0	0	1									
Seminole																																	
Sumter																																	
Suwannee																					1	1	0	0									
Taylor																																	
Union																																	
Volusia									5	3	1	1									3	2	0	1	1	0	0	1					
Wakulla																																	
Walton																					1	0	0	1									
Washington																									1	0	0	1					

* T - Total; 1 - Complete Case Report; 2 - Incomplete Case Reports; 3 - No Case Reports.

TABLE 2.—NUMBER OF CASES OF SCARLET FEVER, WHOOPING COUGH, DIPHTHERIA AND MEASLES REPORTED IN FLORIDA— 1918-1943 INCLUSIVE

	SCARLET FEVER	WHOOPING COUGH	DIPHTHERIA	MEASLES
1943	365	1,134	243	1,483
1942	281	828	258	4,250
1941	205	747	212	11,261
1940	270	383	223	2,305
1939	398	1,124	277	2,716
1938	352	876	456	9,149
1937	377	504	609	635
1936	299	383	309	307
1935	273	532	426	1,176
1934	190	723	491	8,115
1933	203	508	452	1,048
1932	235	379	735	217
1931	266	254	501	3,799
1930	341	398	491	5,287
1929	351	1,171	580	1,117
1928	376	321	588	1,709
1927	501	654	1,095	2,582
1926	459	748	1,224	1,126
1925	175	493	768	128
1924	156	444	681	3,244
1923	94	410	619	2,896
1922	104	94	886	140
1921	172	333	856	575
1920	164	347	576	369
1919	146	203	510	775
1918	138	557	329	2,187
Total	6,891	14,548	14,395	68,596

TABLE 3.—DEATHS FROM WHOOPING COUGH BY AGE INTERVALS, FLORIDA—1934-1943.

Year	Total All Ages	AGE INTERVAL									
		-1	1	2	3	4	5-9	10-14	15-19	20-24	25+
1943	69	50	10	7	1	0	1	0	0	0	0
1942	48	30	11	4	2	0	1	0	0	0	0
1941	38	28	5	2	0	1	2	0	0	0	0
1940	39	29	2	5	1	0	1	0	0	0	1
1939	60	43	12	4	1	0	0	0	0	0	0
1938	68*	45	15	5	0	0	1	0	0	0	1
1937	59	38	10	3	1	2	2	1	1	0	1
1936	25	14	8	0	1	1	1	0	0	0	0
1935	59	38	16	0	0	1	1	2	0	1	0
1934	110	64	22	8	4	5	4	0	0	0	3
Total	575	379	111	38	11	10	14	3	1	1	6
Rate%		65.9	19.3	6.6	1.9	1.8	2.5	0.5	0.2	0.2	1.1

*Age unknown for one death.

TABLE 4.—DEATH RATES (DEATHS PER 100,000) FROM MEASLES, DIPHTHERIA, WHOOPING COUGH, AND SCARLET FEVER, UNITED STATES AND FLORIDA—1934-1943.

Year	Measles		Diphtheria		Wh. Cough		Scar. Fever	
	U.S.	Fla.	U.S.	Fla.	U.S.	Fla.	U.S.	Fla.
1943		0.4		1.4		3.6		0.2
1942	1.0	2.9	1.0	1.5	1.9	2.5	0.3	0.2
1941	1.7	0.9	1.0	1.2	2.8	2.0	0.3	0.1
1940	0.5	0.4	1.1	1.5	2.2	2.0	0.5	0.1
1939	0.9	0.8	1.5	1.8	2.3	3.2	0.7	0.3
1938	2.5	1.7	2.0	1.8	3.7	3.8	0.9	0.2
1937	1.2	0.3	2.0	3.2	3.9	3.4	1.4	0.1
1936	1.0	0.4	2.4	3.4	2.1	1.5	1.9	0.1
1935	3.1	2.1	3.1	3.6	3.7	3.6	2.1	0.1
1934	5.5	6.9	3.3	5.3	5.9	6.9	2.0	0.3

TABLE 5.—DEATHS AND DEATH RATES (DEATHS PER 100,000) BY COLOR FROM MEASLES, DIPHTHERIA, WHOOPING COUGH, AND SCARLET FEVER. FLORIDA—1934-1943.

Year	Measles						Diphtheria					
	Deaths			Rates			Deaths			Rates		
	T	W	C	T	W	C	T	W	C	T	W	C
1943	7	6	1	0.4	0.4	0.2	26	21	5	1.4	1.5	1.0
1942	56	33	23	2.9	2.4	4.4	28	21	7	1.5	1.5	1.4
1941	17	15	2	0.9	1.1	0.4	23	18	5	1.2	1.3	1.0
1940	7	5	2	0.4	0.4	0.4	28	20	8	1.5	1.4	1.5
1939	15	9	6	0.8	0.7	1.2	33	25	8	1.8	1.9	1.6
1938	30	22	8	1.7	1.7	1.6	32	22	10	1.8	1.7	2.0
1937	5	4	1	0.3	0.3	0.2	55	42	13	3.2	3.4	2.7
1936	7	5	2	0.4	0.4	0.4	57	47	10	3.4	3.9	2.1
1935	34	31	3	2.1	2.7	0.6	58	53	5	3.6	4.6	1.1
1934	110	84	26	6.9	7.5	5.6	84	69	15	5.3	6.1	3.2

Year	Whooping Cough						Scarlet Fever					
	Deaths			Rates			Deaths			Rates		
	T	W	C	T	W	C	T	W	C	T	W	C
1943	69	32	37	3.6	2.3	7.1	4	3	1	0.2	0.2	0.2
1942	48	25	23	2.5	1.8	4.4	3	2	1	0.2	0.1	0.2
1941	38	19	19	2.0	1.4	3.7	2	1	1	0.1	0.1	0.2
1940	39	23	16	2.0	1.6	3.1	1	1	0	0.1	0.1	
1939	60	30	30	3.2	2.2	5.9	6	5	1	0.3	0.4	0.2
1938	68	37	31	3.8	2.9	6.2	4	3	1	0.2	0.2	0.2
1937	59	30	29	3.4	2.4	5.9	2	2	0	0.1	0.2	
1936	25	15	10	1.5	1.3	2.1	2	2	0	0.1	0.2	
1935	59	31	28	3.6	2.7	6.0	1	1	0	0.1	0.1	
1934	110	59	51	6.9	5.2	11.0	5	5	0	0.3	0.4	

TABLE 6.—NUMBER OF CASES OF INFECTIOUS DISEASES AND HOOKWORM REPORTED IN FLORIDA—1918 to 1943.

Year	Typhoid Paratyphoid	Epidemic Meningitis	Scarlet Fever	Whooping Cough	Diphtheria	Tuberculosis	Dysentery	Malaria	Syphilis	Influenza	Measles	Polio	Typhus Fever	Hookworm
1943	99	252	365	1,134	243	1,220	312	119	33,540	782	1,483	28	314	6,887
1942	211	25	281	828	258	1,163	73	86	30,104	227	4,324	43	313	10,745
1941	183	27	205	747	212	981	57	145	21,258	3,832	11,261	263	196	7,944
1940	115	7	270	383	223	1,018	44	149	19,889	653	2,305	33	111	9,455
1939	29	20	398	1,124	277	562	59	435	21,092	402	2,716	66	152	5,766
1938	170	61	352	876	456	739	62	471	18,243	112	9,149	32	75	6,081
1937	142	168	377	504	609	1,120	53	894	14,532	544	635	35	107	8,321
1936	97	120	299	383	309	621	49	869	3,287	587	307	42	55	2,211
1935	173	19	73	532	426	523	19	813	4,389	662	1,176	16	27	6,739
1934	132	5	190	723	491	603	41	1,106	5,198	65	8,115	16	36	8,984
1933	186	10	203	508	452	661	33	1,011	4,833	1,267	1,048	8	54	4,870
1932	267	8	235	379	735	591	21	318	4,063	335	217	8	42	3,076
1931	186	36	266	254	501	511	16	339	3,965	1,543	3,799	17	31	3,062
1930	141	18	341	398	491	487	24	576	4,199	104	5,287	11	39	2,054
1929	181	18	351	1,171	580	762	48	1,535	4,273	3,769	1,117	33	48	1,972
1928	338	20	376	321	588	943	75	844	4,307	1,631	1,709	23	49	1,092
1927	591	42	501	654	1,095	1,107	81	360	4,955	481	2,582	39	45	1,983
1926	652	18	459	748	1,224	1,335	90	400	3,509	1,213	1,126	16	16	784
1925	752	16	175	493	768	1,468	88	665	5,736	761	128	59	2	3,467
1924	641	24	156	444	681	1,573	130	1,030	5,066	345	3,244	8	4	4,890
1923	609	23	94	410	619	1,210	81	1,050	2,090	1,015	2,896	15	0	1,466
1922	545	8	104	94	886	1,404	117	970	1,762	1,635	140	16	0	3,869
1921	733	20	172	333	856	1,313	130	979	2,952	643	575	7	1	675
1920	525	28	164	347	576	1,248	92	1,865	2,993	10,379	369	6	1	1,055
1919	539	34	146	203	510	1,009	199	1,895	2,429	2,010	775	6	1	2,057
1918	491	75	138	557	329	522	264	931	1,640	11,631	2,187	6	1	173

TABLE 7.—CASES OF REPORTABLE DISEASES BY MONTHS (INFECTIOUS, PARASITIC AND OTHERS ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.

Disease	Int. Code Number	Total	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Anthrax	7	....	....	....	....	....	....	....	....	....	....	....	....	....
Beriberi	68	....	....	....	....	....	....	....	....	....	....	....	....	....
Botulism	177	....	....	....	....	....	....	....	....	....	....	....	....	....
Cancer	45–55	429	26	63	45	37	38	39	35	32	32	37	12	33
Chancroid	44A	840	61	29	48	52	124	103	86	52	61	88	43	93
Chickenpox (Varicella)	38E	2,469	163	324	606	618	500	59	8	8	2	5	56	120
Cholera Asiatic	4	....	....	....	....	....	....	....	....	....	....	....	....	....
Conjunctivitis (Pink Eye)	88	15	0	0	0	1	1	3	2	3	1	2	0	2
Dengue	38F	5	0	0	0	0	0	0	4	0	1	0	0	0
Diarrhea, Infantile	119–120A	42	0	8	4	0	2	6	3	7	5	5	0	2
Diphtheria	10	243	27	20	8	14	12	3	14	7	21	46	48	23
Dysentery, Amebiasis	27B	132	6	1	3	2	8	18	21	7	22	13	19	12
Bacillary	27A	180	0	0	3	5	1	2	2	2	1	10	3	151
Other	27C	24	0	0	0	0	0	3	3	6	5	6	1	0
Encephalitis, Epi.	37C	14	0	1	2	0	2	1	0	0	0	0	3	5
Erysipelas	11	32	3	0	5	4	4	0	6	2	4	2	2	0
German Measles	38D	1,495	13	182	389	438	329	118	9	3	2	3	2	7
Glanders	26B	....	....	....	....	....	....	....	....	....	....	....	....	....
Gonorrhea	25	16,925	1,221	1,214	1,083	1,139	1,878	1,457	1,426	1,473	1,469	1,855	1,124	1,586
Granuloma Inguinale	44A	....	....	....	....	....	....	....	....	....	....	....	....	....
Hookworm	40	6,887	731	946	1,308	812	244	194	380	348	215	634	340	735
Influenza	33	782	20	14	31	61	62	54	51	25	22	38	28	376
Jaundice, Infectious	32A	27	0	0	5	0	5	2	9	2	1	2	0	1
Leprosy	23	1	0	0	0	1	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	75	0	0	0	0	0	0	0	10	21	10	10	24
Malaria	28	119	1	2	14	9	8	17	18	15	9	8	5	13
Measles (Rubeola)	35	1,483	40	93	222	259	393	201	64	9	9	30	70	93
Meningitis	6	252	11	30	32	30	38	29	19	14	5	11	12	21
Mumps (Parotitis)	44C	2,631	230	291	503	539	528	190	91	30	27	37	66	99
Mycosis, Actinomycosis	43	....	....	....	....	....	....	....	....	....	....	....	....	....
Blastomycosis	43	....	....	....	....	....	....	....	....	....	....	....	....	....
Favus	43	....	....	....	....	....	....	....	....	....	....	....	....	....
Opthalmia Neonatorum	25	17	0	5	1	3	1	2	1	2	0	1	1	0

TABLE 7.—CASES OF REPORTABLE DISEASES BY MONTHS (INFECTIOUS, PARASITIC AND OTHERS ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Continued)

Disease	Int. Code Number	Total	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Paratyphoid Fever	2	31	0	0	0	3	1	5	4	0	1	1	8	8
Pellagra	69	26	3	1	0	1	11	6	0	1	1	1	0	1
Plague	3	....	....	....	....	....	....	....	....	....	....	....	....	....
Pneumonia, (all forms)	107–109	1,783	98	143	192	132	155	144	171	133	79	139	125	272
Poliomyelitis	36	28	1	5	4	0	0	3	2	0	8	1	2	2
Psittacosis	38F	....	....	....	....	....	....	....	....	....	....	....	....	....
Puerperal Infection	147B	....	....	....	....	....	....	....	....	....	....	....	....	....
Rabies, Human	38B	1	0	0	0	0	1	0	0	0	0	0	0	0
Animal		31	0	0	0	12	5	4	7	0	0	1	1	1
Rickettsial Diseases	39	....	....	....	....	....	....	....	....	....	....	....	....	....
Brills or Typhus	39A	314	10	18	24	21	27	31	51	21	30	28	30	23
Rocky Mtn. Spot. Fever	39C	....	....	....	....	....	....	....	....	....	....	....	....	....
Scarlet Fever (Scarletina)	8	365	47	48	34	33	30	7	16	12	14	30	43	51
Septic Sore Throat	115B	36	5	5	4	3	1	2	9	1	1	2	2	1
Smallpox (Variola)	34	2	0	0	0	0	1	0	0	0	0	0	0	1
Syphilis	30	33,540	2,975	3,066	3,065	2,603	3,073	3,236	2,322	3,319	2,619	2,763	2,029	2,470
Tetanus	12	29	0	2	1	0	1	4	2	2	5	3	5	4
Trachoma	88	2	0	0	0	0	0	0	0	0	0	2	0	0
Trichinosis	42	1	0	1	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	1,220	74	98	109	160	95	115	117	94	88	94	100	76
Other Forms	14–22	....	....	....	....	....	....	....	....	....	....	....	....	....
Tularemia	26A	2	0	0	0	1	0	0	0	0	0	0	1	0
Typhoid Fever	1	68	1	1	8	5	11	10	8	10	3	3	2	6
Undulant Fever	5	36	0	1	3	4	7	3	9	2	1	2	1	3
Vincent's Angina	32B	306	10	5	16	5	26	31	25	18	33	55	30	52
Whooping Cough	9	1,134	70	81	78	102	195	96	94	91	68	110	41	108
Yellow Fever	38A	....	....	....	....	....	....	....	....	....	....	....	....	....
Other Diseases: Giardiasis	29	16	0	0	0	0	0	0	0	0	0	0	2	14
Ascariasis		390	38	36	63	31	30	23	20	14	3	14	12	106
Oxyuriasis		52	5	4	9	7	4	1	2	3	0	1	3	13
Trichuriasis		58	1	6	4	4	4	0	6	0	0	10	4	19
Tapeworm		17	0	0	2	0	2	1	3	0	0	2	2	5

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.

DISEASE	Code No.	Total Year	JANUARY Week Ending T	9	16	23	30	FEBRUARY Week Ending T	6	13	20	27
Anthrax	7	0	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	429	26	13	0	4	9	63	15	9	20	19
Chancroid	44A	840	61	23	7	20	11	29	5	11	13	0
Chickenpox	38E	2,469	163	47	6	36	74	324	30	89	94	111
Cholera, Asi.	4	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	15	0	0	0	0	0	0	0	0	0	0
Dengue	38F	5	0	0	0	0	0	0	0	0	0	0
Diarrhea	119–120A	42	0	0	0	0	0	8	1	1	2	4
Diphtheria	10	243	27	9	4	7	7	20	7	3	1	9
Dysentery A.-B.	27A-B	312	6	1	0	5	0	1	0	0	0	1
Encephalitis, Epi	37C	14	0	0	0	0	0	1	0	0	0	1
Erysipelis	11	32	3	1	0	0	2	0	0	0	0	0
German Measles	38D	1,495	13	1	1	4	7	182	5	76	52	49
Glanders	26B	0	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	16,925	1,221	306	328	317	270	1,214	122	411	431	250
Hookworm	40	6,887	731	551	17	79	84	946	196	395	114	241
Influenza	33	782	20	6	5	2	7	14	3	3	5	3
Jaundice, Inf.	32A	27	0	0	0	0	0	0	0	0	0	0
Leprosy	23	1	0	0	0	0	0	0	0	0	0	0
Lympho. Venereum	44	75	0	0	0	0	0	0	0	0	0	0
Malaria	28	119	1	0	0	1	0	2	1	1	0	0
Measles	35	1,483	40	8	8	12	12	93	12	29	23	29
Meningitis, Menin.	6	252	11	4	3	3	1	30	11	4	3	12
Mumps	44C	2,631	230	29	52	63	86	291	56	58	62	115
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon.	25	17	0	0	0	0	0	5	0	1	2	2
Paratyphoid	2	31	0	0	0	0	0	0	0	0	0	0
Pellagra	69	26	3	1	0	0	2	1	0	0	0	1
Plague	3	0	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	1,783	98	45	18	20	15	143	22	44	39	38
Poliomyelitis	36	28	1	0	0	0	1	5	3	1	1	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0	0
Puerperal Inf.	147C	0	0	0	0	0	0	0	0	0	0	0
Rabies, Hum.	38B	1	0	0	0	0	0	0	0	0	0	0
Rickettsial Disease Brills or Typhus	39A	314	10	5	1	2	2	18	4	9	2	3
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	365	47	14	3	19	11	47	11	10	8	18
Septic Sore Throat	115B	36	5	5	0	0	0	5	0	2	3	0
Smallpox	34	2	0	0	0	0	0	0	0	0	0	0
Syphilis	30	33,540	2,975	620	917	586	852	3,066	1,167	694	749	456
Tetanus	12	29	0	0	0	0	0	2	1	0	0	1
Trachoma	88	2	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	1	0	0	0	0	0	1	0	1	0	0
Tuberculosis, Pul.	13	1,220	74	25	6	28	15	98	17	24	29	28
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	2	0	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	68	1	0	0	1	0	1	0	0	1	0
Undulant (Bruc.)	5	36	0	0	0	0	0	1	0	0	1	0
Vincent's Angina	32B	306	10	1	3	2	4	5	0	1	1	3
Whooping Cough	9	1,134	70	16	11	17	26	81	12	15	29	25
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0	0

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Cont)

DISEASE	Code No.	MARCH					APRIL				
		Week Ending					Week Ending				
		T	6	13	20	27	T	3	10	17	24
Anthrax	7	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	45	9	15	17	4	37	6	9	17	5
Chancroid	44A	48	30	4	13	1	52	12	26	8	6
Chickenpox	38E	606	100	116	170	220	618	192	175	156	95
Cholera, Asi	4	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	0	0	0	0	0	1	1	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0	0	0
Diarrhea	119–120A	4	2	1	0	1	0	0	0	0	0
Diphtheria	10	8	2	1	4	1	14	2	2	4	6
Dysentery A.-B	27A–B	6	0	1	1	4	7	0	2	3	2
Encephalitis, Epi	37C	2	0	2	0	0	0	0	0	0	0
Erysipelis	11	5	0	3	1	1	4	2	1	1	0
German Measles	38D	389	105	102	70	112	438	136	88	103	111
Glanders	26B	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	1,083	246	337	291	209	1,139	355	430	126	228
Hookworm	40	1,308	459	432	224	193	812	283	156	172	201
Influenza	33	31	3	3	11	14	61	5	33	16	7
Jaundice, Inf	32A	5	0	4	1	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	1	0	0	1	0
Lympho. Venereum	44	0	0	0	0	0	0	0	0	0	0
Malaria	28	14	2	2	4	6	9	6	2	0	1
Measles	35	222	47	48	59	68	259	61	68	48	82
Meningitis, Menin.	6	32	5	8	15	4	30	2	6	13	9
Mumps	44C	503	131	73	147	152	539	130	168	127	114
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon	25	1	0	0	1	0	3	0	1	1	1
Paratyphoid	2	0	0	0	0	0	3	0	0	1	2
Pellagra	69	0	0	0	0	0	1	0	1	0	0
Plague	3	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	192	53	56	58	25	132	29	29	36	38
Poliomyelitis	36	4	2	0	1	0	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0
Puerperal Inf	147C	0	0	0	0	0	0	0	0	0	0
Rabies, Hum	38B	0	0	0	0	0	0	0	0	0	0
Rickettsial Disease		0	0	0	0	0	0	0	0	0	0
Brills or Typhus	39A	24	2	2	6	14	21	12	3	3	3
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	35	15	5	11	4	33	7	11	8	7
Septic Sore Throat	115B	4	1	0	3	0	3	0	1	1	1
Smallpox	34	0	0	0	0	0	0	0	0	0	0
Syphilis	30	3,065	595	833	985	652	2,603	695	824	542	542
Tetanus	12	1	0	0	0	1	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pul.	13	109	28	33	26	22	160	27	38	68	27
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	1	0	0	0	1
Typhoid Fever	1	8	0	2	5	1	5	1	3	0	1
Undulant (Bruc.)	5	3	1	0	0	2	4	0	0	3	1
Vincent's Angina	32B	16	1	1	14	0	5	3	1	1	0
Whooping Cough	9	78	18	14	32	14	102	30	42	17	13
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Cont)

DISEASE	Code No.	MAY						JUNE				
		Week Ending						Week Ending				
		T	1	8	15	22	29	T	5	12	19	26
Anthrax	7	0	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	38	7	7	7	10	7	39	4	7	6	22
Chancroid	44A	124	34	23	34	12	21	103	8	46	28	21
Chickenpox	38E	500	117	136	103	68	76	59	34	10	8	7
Cholera, Asi	4	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	1	0	0	0	1	0	3	2	0	0	1
Dengue	38F	0	0	0	0	0	0	0	0	0	0	0
Diarrhea	119–120A	2	0	0	1	1	0	6	1	0	3	2
Diphtheria	10	12	3	2	3	3	1	3	2	0	1	0
Dysentery A.-B	27A–B	9	1	1	0	7	0	20	4	0	11	5
Encephalitis, Epi	37C	2	0	1	0	1	0	1	1	0	0	0
Erysipelis	11	4	2	0	1	1	0	0	0	0	0	0
German Measles	38D	329	46	124	36	73	50	118	78	23	14	3
Glanders	26B	0	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	1,878	517	406	332	341	282	1,457	208	516	405	328
Hookworm	40	244	91	47	35	32	39	194	22	57	41	74
Influenza	33	62	15	12	10	19	6	54	36	4	8	6
Jaundice, Inf	32A	5	5	0	0	0	0	2	1	0	0	1
Leprosy	23	0	0	0	0	0	0	0	0	0	0	0
Lympho. Venereum	44	0	0	0	0	0	0	0	0	0	0	0
Malaria	28	8	0	1	1	4	2	17	9	3	2	3
Measles	35	393	67	87	139	52	48	201	126	18	24	33
Meningitis, Menin.	6	38	7	12	6	8	5	29	20	2	3	4
Mumps	44C	528	160	123	87	79	79	190	108	27	41	14
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon	25	1	0	0	0	1	0	2	0	1	1	0
Paratyphoid	2	1	0	0	0	1	0	5	0	5	0	0
Pellagra	69	11	1	4	0	3	3	6	0	1	0	5
Plague	3	0	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	155	40	40	27	27	21	144	37	21	30	56
Poliomyelitis	36	0	0	0	0	0	0	3	3	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0	0
Puerperal Inf	147C	0	0	0	0	0	0	0	0	0	0	0
Rabies, Hum	38B	1	0	1	0	0	0	0	0	0	0	0
Rickettsial Disease												
Brills or Typhus	39A	27	2	5	1	13	6	31	3	5	11	12
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	30	10	11	3	4	2	7	4	1	1	1
Septic Sore Throat	115B	1	0	1	0	0	0	2	1	0	0	1
Smallpox	34	1	0	0	0	0	1	0	0	0	0	0
Syphilis	30	3,073	551	821	551	444	706	3,236	1,311	642	490	793
Tetanus	12	1	0	0	0	0	1	4	0	2	2	0
Trachoma	88	0	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pul.	13	95	14	13	20	34	14	115	27	21	29	38
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	11	1	3	1	3	3	10	5	2	1	2
Undulant (Bruc.)	5	7	2	0	2	1	2	3	1	1	0	1
Vincent's Angina	32B	26	0	4	4	10	8	31	13	7	4	7
Whooping Cough	9	195	44	52	34	28	37	96	26	21	26	23
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0	0

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Cont)

DISEASE	Code No.	JULY						AUGUST				
		Week Ending						Week Ending				
		T	3	10	17	24	31	T	7	14	21	28
Anthrax	7	0	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	35	5	3	7	5	15	32	6	1	9	16
Chancroid	44A	86	30	18	12	19	7	52	16	16	5	15
Chickenpox	38E	8	4	0	2	0	2	8	1	1	4	2
Cholera, Asi.	4	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	2	0	2	0	0	0	3	0	1	1	1
Dengue	38F	4	4	0	0	0	0	0	0	0	0	0
Diarrhea	119–120A	3	0	1	1	0	1	7	0	0	5	2
Diphtheria	10	14	2	2	4	4	2	7	3	2	1	1
Dysentery A.-B	27A–B	23	2	8	2	4	7	9	1	2	3	3
Encephalitis, Epi	37C	0	0	0	0	0	0	0	0	0	0	0
Erysipelis	11	6	2	1	2	0	1	2	0	0	2	0
German Measles	38D	9	2	2	2	1	2	3	0	0	0	3
Glanders	26B	0	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	1,426	288	298	273	361	206	1,473	269	331	272	601
Hookworm	40	380	171	37	47	47	78	348	75	97	125	51
Influenza	33	51	8	11	18	9	5	25	4	5	5	11
Jaundice, Inf.	32A	9	2	3	2	1	1	2	0	1	0	1
Leprosy	23	0	0	0	0	0	0	0	0	0	0	0
Lympho. Venereum	44	0	0	0	0	0	0	10	1	8	1	0
Malaria	28	18	2	2	4	4	6	15	1	4	3	7
Measles	35	64	11	18	13	10	12	9	3	1	3	2
Meningitis, Menin.	6	19	3	5	5	1	5	14	2	7	4	1
Mumps	44C	91	30	22	15	12	12	30	9	5	13	3
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon.	25	1	0	0	0	0	1	2	1	0	0	1
Paratyphoid	2	4	0	1	1	1	1	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	1	0	1	0	0
Plague	3	0	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	171	40	32	28	21	50	133	18	29	58	28
Poliomyelitis	36	2	0	0	2	0	0	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0	0
Puerperal Inf.	147C	0	0	0	0	0	0	0	0	0	0	0
Rabies, Hum.	38B	0	0	0	0	0	0	0	0	0	0	0
Rickettsial Disease												
Brills or Typhus	39A	51	9	8	15	8	11	21	6	7	5	3
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	16	4	2	5	1	4	12	4	1	2	5
Septic Sore Throat	115B	9	2	0	1	4	2	1	1	0	0	0
Smallpox	34	0	0	0	0	0	0	0	0	0	0	0
Syphilis	30	2,322	354	617	467	342	542	3,319	578	640	938	1,163
Tetanus	12	2	0	0	0	2	0	2	0	0	1	1
Trachoma	88	0	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pul.	13	117	16	21	20	17	43	94	19	15	27	33
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	8	0	3	1	2	2	10	2	2	3	3
Undulant (Bruc.)	5	9	3	2	1	2	1	2	0	0	2	0
Vincent's Angina	32B	25	5	6	5	4	5	18	3	3	4	8
Whooping Cough	9	94	38	11	13	12	20	91	11	27	32	21
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0	0

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Cont)

DISEASE	Code No.	SEPTEMBER					OCTOBER					
		Week Ending					Week Ending					
		T	4	11	18	25	T	2	9	16	23	30
Anthrax	7	0	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	32	7	11	3	11	37	6	8	4	5	14
Chancroid	44A	61	16	14	13	18	88	20	12	22	11	23
Chickenpox	38E	2	0	1	0	1	5	0	0	1	2	2
Cholera, Asi.	4	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	1	0	0	0	1	2	0	0	2	0	0
Dengue	38F	1	0	0	1	0	0	0	0	0	0	0
Diarrhea	119–120A	5	0	3	1	1	5	0	1	2	1	1
Diphtheria	10	21	6	6	3	6	46	5	5	8	7	21
Dysentery A.-B	27A–B	23	5	13	3	2	23	3	1	6	8	5
Encephalitis, Epi	37C	0	0	0	0	0	0	0	0	0	0	0
Erysipelis	11	4	2	1	1	0	2	1	0	1	0	0
German Measles	38D	2	1	0	0	1	3	1	0	1	1	0
Glanders	26B	0	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	1,469	421	319	257	472	1,855	388	324	464	340	339
Hookworm	40	215	29	59	75	52	634	38	155	59	243	139
Influenza	33	22	11	2	5	4	38	4	12	11	10	1
Jaundice, Inf.	32A	1	1	0	0	0	2	0	1	0	0	1
Leprosy	23	0	0	0	0	0	0	0	0	0	0	0
Lympho. Venereum	44	21	5	10	6	0	10	1	1	1	2	5
Malaria	28	9	4	2	0	3	8	0	1	2	4	1
Measles	35	9	0	4	3	2	30	1	5	6	4	14
Meningitis, Menin.	6	5	3	0	2	0	11	4	2	3	0	2
Mumps	44C	27	6	9	4	8	37	6	4	9	9	9
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon.	25	0	0	0	0	0	1	1	0	0	0	0
Paratyphoid	2	1	0	1	0	0	1	0	0	1	0	0
Pellagra	69	1	0	0	1	0	1	0	0	0	0	1
Plague	3	0	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	79	10	12	22	35	139	28	23	24	39	25
Poliomyelitis	36	8	0	0	6	2	1	0	0	0	1	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0	0
Puerperal Inf.	147C	0	0	0	0	0	0	0	0	0	0	0
Rabies, Hum.	38B	0	0	0	0	0	0	0	0	0	0	0
Rickettsial Disease												
Brills or Typhus	39A	30	9	8	7	6	28	3	8	6	3	8
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	14	1	2	7	4	30	5	4	9	1	11
Septic Sore Throat	115B	1	0	0	0	1	2	0	1	0	0	1
Smallpox	34	0	0	0	0	0	0	0	0	0	0	0
Syphilis	30	2,619	599	632	749	639	2,763	320	634	655	506	648
Tetanus	12	5	1	4	0	0	3	0	0	1	1	1
Trachoma	88	0	0	0	0	0	2	0	1	1	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pul.	13	88	17	15	21	35	94	27	22	13	15	17
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	3	0	1	1	1	3	1	1	0	1	0
Undulant (Bruc.)	5	1	0	0	0	1	2	0	2	0	0	0
Vincent's Angina	32B	33	12	3	11	7	55	23	9	14	3	6
Whooping Cough	9	68	19	21	12	16	110	21	31	23	16	19
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0	0

TABLE 8.—CASES OF REPORTABLE DISEASES BY WEEKS (INFECTIOUS, PARASITIC AND OTHER, ACCORDING TO THE INTERNATIONAL LIST OF CAUSES OF DEATH) FLORIDA, 1943.—(Cont)

DISEASE	Code No.	NOVEMBER					DECEMBER					
		Week Ending					Week Ending					
		T	6	13	20	27	T	4	11	18	25	31
Anthrax	7	0	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	12	8	0	2	2	33	8	9	1	5	10
Chancroid	44A	43	7	13	6	17	93	7	29	1	33	23
Chickenpox	38E	56	7	7	32	10	120	37	31	29	11	12
Cholera, Asi.	4	0	0	0	0	0	0	0	0	0	0	0
Conjunctivitis	88	0	0	0	0	0	2	0	1	0	0	1
Dengue	38F	0	0	0	0	0	0	0	0	0	0	0
Diarrhea	119–120A	0	0	0	0	0	2	0	1	1	0	0
Diphtheria	10	48	8	12	20	8	23	4	4	2	8	5
Dysentery A.-B.	27A–B	22	7	11	1	3	163	5	1	2	5	150
Encephalitis, Epi.	37C	3	2	1	0	0	5	0	1	0	0	4
Erysipelis	11	2	1	1	0	0	0	0	0	0	0	0
German Measles	38D	2	1	0	1	0	7	3	2	1	1	0
Glanders	26B	0	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	1,124	144	331	309	340	1,586	59	387	355	452	333
Hookworm	40	340	66	106	84	84	735	49	197	115	129	245
Influenza	33	28	3	11	7	7	376	6	16	102	112	140
Jaundice, Inf.	32A	0	0	0	0	0	1	0	0	0	0	1
Leprosy	23	0	0	0	0	0	0	0	0	0	0	0
Lympho. Venereum	44	10	3	3	4	0	24	4	8	1	7	4
Malaria	28	5	2	0	2	1	13	3	1	2	5	2
Measles	35	70	24	5	24	17	93	16	23	19	9	26
Meningitis, Minin.	6	12	2	4	4	2	21	7	2	1	4	7
Mumps	44C	66	18	13	13	22	99	19	26	28	14	12
Mycosis, Actino-, Blasto-, Favus	43	0	0	0	0	0	0	0	0	0	0	0
Opthalmia Neon.	25	1	0	0	0	1	0	0	0	0	0	0
Paratyphoid	2	8	6	0	2	0	8	1	1	2	2	2
Pellagra	69	0	0	0	0	0	1	0	1	0	0	0
Plague	3	0	0	0	0	0	0	0	0	0	0	0
Pneumonia, (all forms)	107–109	125	36	22	43	24	272	51	30	58	59	74
Poliomyelitis	36	2	2	0	0	0	2	0	1	1	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0	0
Puerperal Inf.	147C	0	0	0	0	0	0	0	0	0	0	0
Rabies, Hum.	38B	0	0	0	0	0	0	0	0	0	0	0
Rickettsial Disease												
Brills or Typhus	39A	30	7	7	7	9	23	3	2	2	9	7
Rky. Mtn. Sp. Fever	39C	0	0	0	0	0	0	0	0	0	0	0
Others	39B	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	8	43	12	12	10	9	51	6	23	7	6	9
Septic Sore Throat	115B	2	1	0	1	0	1	0	0	0	1	0
Smallpox	34	0	0	0	0	0	1	0	0	0	1	0
Syphilis	30	2,029	427	507	750	345	2,470	593	489	190	431	767
Tetanus	12	5	2	1	1	1	4	0	3	0	0	1
Trachoma	88	0	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pul.	13	100	31	23	17	29	76	12	17	17	9	21
Other Forms	14–22	0	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	1	1	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	2	0	0	2	0	6	1	1	0	2	2
Undulant (Bruc.)	5	1	0	0	1	0	3	0	0	2	1	0
Vincent's Angina	32B	30	8	8	7	7	52	6	7	13	0	16
Whooping Cough	9	41	26	4	7	4	108	11	32	22	24	19
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.

DISEASE	Code No.	STATE				COUNTIES			
		1938–42	1941	1942	1943	Alachua		Baker	
		Population: 2,080,003				38,218		5,862	
		5-Yr. Mean	Total For Year	Total For Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	1	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	344	351	384	429	0	0	1	0
Chancroid	44A	161	152	452	840	0	5	0	0
Chickenpox (Varicella)	38E	1,377	908	1,388	2,469	4	2	3	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	15	0	0	0	0
Dengue	38F	9	6	1	5	0	0	0	0
Diarrhea, Infantile	119–120A	1	7	0	42	0	0	0	1
Diphtheria	10	290	212	258	243	5	3	5	4
Dysentery, Amebiasis	27B	34	32	25	132	0	1	0	0
” Bacillary	27A	19	18	47	180	0	0	1	0
” Other	27C	6	7	1	24	0	0	0	0
Encephalitis, Epi.	37C	7	6	1	14	0	0	0	0
Erysipelas	11	0	0	0	32	0	0	0	0
German Measles	38D	361	1,474	143	1,495	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	3,759	3,065	10,165	16,925	197	118	21	10
Granuloma Inguinale	44A	0	70	127	251	0	0	0	0
Hookworm	40	7,998	7,944	10,745	6,887	0	2	420	652
Influenza	33	1,045	3,832	227	782	0	0	0	0
Jaundice, Infectious	32A	0	0	0	27	0	0	0	0
Leprosy	23	2	2	0	1	0	0	0	0
Lymphopathia Ven.	44A	0	46	124	254	0	0	0	0
Malaria	28	255	145	86	119	0	0	1	0
Measles (Rubeola)	35	5,951	11,261	4,324	1,483	88	1	10	0
Meningitis	6	28	27	25	252	0	1	0	0
Mumps (Parotitis)	44C	792	.650	1,789	2,631	11	1	9	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
” Blastomycosis	43B	0	0	0	0	0	0	0	0
” Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	14	14	19	23	0	1	0	0
Paratyphoid Fever	2	12	17	15	31	0	0	0	0
Pellagra	69	113	9	74	26	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	*894	*1,125	*841	1,238	0	0	0	0
” Lobar	108	0	0	0	198	0	1	0	0
” Other	109	0	0	0	347	0	0	0	0
Poliomyelitis	36	87	263	43	28	1	1	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	1	0	0	1	0	0	0	0
” Animal	38B	15	0	0	31	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	179	196	313	314	0	2	2	0
Rocky Mtn. Spot. Fev.	39C	0	0	1	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	301	205	281	365	0	0	0	2
Septic Sore Throat	115B	44	38	35	36	0	0	0	0
Smallpox (Variola)	34	5	0	1	2	0	0	0	0
Syphilis	30	22,117	21,258	30,104	33,540	961	783	76	45
Tetanus	12	13	12	19	29	0	0	0	0
Trachoma	88	7	9	1	2	0	0	0	0
Trichinosis	42	1	2	1	1	0	0	0	0
Tuberculosis, Pulmonary	13	1,051	981	1,163	1,220	4	39	10	1
” Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	11	3	7	2	1	0	0	0
Typhoid Fever	1	152	166	196	68	0	4	1	0
Undulant Fever	5	40	21	37	36	0	0	0	0
Vincent's Angina	32B	168	71	145	306	0	0	0	1
Whooping Cough	9	799	747	828	1,134	0	2	9	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	16	0	0	0	0
Ascariasis	....	0	0	0	390	0	0	0	0
Oxyuriasis	....	0	0	0	52	0	0	0	0
Trichuriasis	....	0	0	0	58	0	0	0	0
Tapeworm	....	0	0	0	17	0	0	0	0
Catarrhal Fever	....	0	0	0	44	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Bay		Bradford		Brevard		Broward	
		36,210		12,724		18,069		51,530	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	10	5	3	3	0	1	3	2
Chickenpox (Varicella)	38E	0	1	1	0	0	0	38	120
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	2
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	1	0	0	0	0
Diphtheria	10	6	2	1	2	0	0	7	3
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	1
" Bacillary	27A	0	4	0	0	0	1	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	1
German Measles	38D	0	0	0	0	0	10	0	21
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	25	422	97	86	12	91	100	231
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	637	658	97	193	0	0	39	15
Influenza	33	0	1	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	1
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	1	0	0	0	1
Malaria	28	0	0	0	0	0	1	0	2
Measles (Rubeola)	35	2	5	3	1	0	5	95	38
Meningitis	6	0	0	0	0	1	0	1	5
Mumps (Parotitis)	44C	0	3	0	8	0	9	32	17
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	2
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	1	3	0	0	7	6
" Lobar	108	0	0	0	4	0	0	0	0
" Other	109	0	0	0	0	0	1	0	3
Poliomyelitis	36	0	0	0	0	0	0	1	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	26	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	1	2	1	0	1	1	5
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	21	5	0	0	0	0	3	5
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	1	0	0	0	0	0	0	0
Syphilis	30	412	553	183	199	168	419	773	742
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	12	8	2	1	0	0	26	39
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	1	0
Typhoid Fever	1	0	2	0	0	0	2	1	0
Undulant Fever	5	0	0	1	0	0	1	2	4
Vincent's Angina	32B	0	0	0	0	0	4	0	16
Whooping Cough	9	0	30	2	4	0	0	40	13
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Calhoun		Charlotte		Citrus		Clay	
		7,320		3,586		4,950		8,195	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	0	0	1	3	0	1	2	198
Chickenpox (Varicella)	38E	0	0	0	0	0	0	7	22
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	0	0	0	0	1	0	25	0
Dysentery, Amebiasis	27B	0	0	0	0	0	0	1	0
" Bacillary	27A	0	0	0	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	7
German Measles	38D	0	0	0	0	0	0	1	701
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	2	5	8	33	0	11	1,539	1,923
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	0	0	0	0	0	0	0	248
Influenza	33	0	0	0	0	0	0	0	32
Jaundice, Infectious	32A	0	0	0	0	0	0	0	9
Leprosy	23	0	0	0	0	0	0	0	1
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	5
Malaria	28	0	0	0	0	0	0	2	8
Measles (Rubeola)	35	0	0	0	0	0	0	13	100
Meningitis	6	0	0	0	0	0	0	0	46
Mumps (Parotitis)	44C	0	0	0	0	0	0	10	174
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	1	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	0	0	0	0	0	207
" Lobar	108	0	0	0	0	0	0	0	89
" Other	109	0	0	0	0	0	0	0	39
Poliomyelitis	36	0	0	0	0	1	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	4
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	0	0	0	5	0	3	4
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	0	0	0	0	5	7
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	27	48	169	65	17	170	391	424
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	2	0	1	0	0	0	2	45
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	0	0	1	1	1	0
Undulant Fever	5	0	0	0	0	0	0	0	0
Vincent's Angina	32B	0	0	0	0	2	0	0	24
Whooping Cough	9	0	0	0	0	0	0	3	23
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Collier		Columbia		Dade		DeSoto	
		4,271		15,266		301,144		8,299	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	1	37	27	319	387	0	0
Chancroid	44A	59	0	0	0	51	95	1	1
Chickenpox (Varicella)	38E	0	0	4	0	337	553	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	4	0	0
Dengue	38F	0	0	0	0	0	1	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	16	0	0
Diphtheria	10	0	0	10	1	16	6	0	0
Dysentery, Amebiasis	27B	0	0	0	0	3	6	0	0
" Bacillary	27A	0	0	0	0	4	145	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	12	0	0
Erysipelas	11	0	0	0	0	0	3	0	0
German Measles	38D	0	0	0	2	18	316	0	1
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	1	14	8	26	522	1,349	14	47
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	1	5	229	10	101	16	0	0
Influenza	33	0	1	6	1	74	96	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	9	0	0
Malaria	28	0	0	1	0	7	15	1	0
Measles (Rubeola)	35	0	0	2	0	898	457	0	0
Meningitis	6	0	0	0	1	2	39	0	0
Mumps (Parotitis)	44C	0	0	4	0	297	720	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	4	9	0	0
Paratyphoid Fever	2	0	0	1	0	7	6	0	0
Pellagra	69	0	0	9	0	4	4	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	1	0	7	471	576	0	0
" Lobar	108	0	0	0	3	0	23	0	0
" Other	109	0	0	0	0	0	83	0	0
Poliomyelitis	36	0	0	1	0	8	7	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	1	0	10	6	37	18	1	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	3	1	47	87	0	0
Septic Sore Throat	115B	0	0	0	0	28	21	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	190	34	59	781	4,229	4,458	264	166
Tetanus	12	0	0	0	0	11	12	0	0
Trachoma	88	0	0	0	0	1	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	0	0	84	35	393	407	3	1
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	2	2	11	2	0	0
Undulant Fever	5	0	0	1	0	7	6	0	0
Vincent's Angina	32B	0	0	0	0	26	54	0	0
Whooping Cough	9	0	0	0	0	279	317	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Dixie		Duval		Escambia		Flagler	
		6,244		258,381		87,946		2,394	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	6	0	0	0	0	0
Chancroid	44A	0	0	54	192	34	13	0	0
Chickenpox (Varicella)	38E	0	0	554	545	34	17	0	1
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	12	0	0	0	0
Diphtheria	10	0	0	46	65	7	33	0	0
Dysentery, Amebiasis	27B	0	0	4	3	0	1	0	0
" Bacillary	27A	0	0	11	6	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	1	0	0	0	0
Erysipelas	11	0	0	0	14	0	0	0	0
German Measles	38D	0	0	55	48	27	5	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	1	0	2,543	3,535	514	1,127	11	8
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	0	0	631	278	179	103	14	0
Influenza	33	0	0	11	15	23	4	0	0
Jaundice, Infectious	32A	0	0	0	0	0	1	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	3	0	3	0	0
Malaria	28	0	0	5	14	5	1	1	0
Measles (Rubeola)	35	0	0	1,368	104	78	24	5	0
Meningitis	6	0	0	1	47	5	13	0	0
Mumps (Parotitis)	44C	0	0	734	848	881	13	13	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	2	4	3	0	0	0
Paratyphoid Fever	2	1	0	1	2	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	67	45	13	0	0	0
" Lobar	108	0	0	0	11	0	0	0	0
" Other	109	0	0	0	35	0	0	0	0
Poliomyelitis	36	1	0	9	1	2	1	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	0	65	72	18	37	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	35	70	26	29	0	1
Septic Sore Throat	115B	0	0	5	10	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	74	215	3,547	6,255	660	793	79	94
Tetanus	12	0	0	2	12	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	2	0	163	148	30	22	1	0
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	1	0	0	0	0	0
Typhoid Fever	1	0	1	23	6	11	8	0	0
Undulant Fever	5	0	0	3	4	2	2	0	2
Vincent's Angina	32B	0	0	6	57	3	4	0	0
Whooping Cough	9	0	0	116	281	18	13	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

		Counties							
		Franklin		Gadsden		Gilchrist		Glades	
		10,376		30,029		3,399		1,992	
DISEASE	Code No.	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	5	8	0	0	0	0
Chancroid	44A	0	2	0	1	0	0	0	0
Chickenpox (Varicella)	38E	7	5	9	18	0	0	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	2	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	3	0	12	3	0	0	0	1
Dysentery, Amebiasis	27B	0	1	15	99	0	0	1	0
" Bacillary	27A	0	0	0	1	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	6	0	0	0	0
German Measles	38D	0	11	0	1	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	30	158	56	41	0	1	7	8
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	13	38	238	484	36	1	13	34
Influenza	33	0	32	45	40	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	1	0	0	0	0	0	0
Malaria	28	3	4	19	5	0	0	0	0
Measles (Rubeola)	35	39	25	57	6	0	0	0	0
Meningitis	6	0	8	0	0	0	0	0	0
Mumps (Parotitis)	44C	3	53	18	23	0	0	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	1	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	0
Pellagra	69	0	0	2	5	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	6	54	91	76	0	0	0	1
" Lobar	108	0	6	0	28	0	0	0	0
" Other	109	0	1	0	3	0	0	0	0
Poliomyelitis	36	0	0	1	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	2	0	2	9	0	0	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	2	3	4	1	0	0	2
Septic Sore Throat	115B	0	0	0	3	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	96	117	371	482	42	4	110	18
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	3	6	36	41	2	1	0	1
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	1	0	0	0	0
Typhoid Fever	1	1	3	12	6	0	0	0	0
Undulant Fever	5	1	0	0	1	1	0	0	0
Vincent's Angina	32B	0	0	0	0	0	0	0	0
Whooping Cough	9	0	0	1	1	0	0	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

		Counties									
		Gulf		Hamilton		Hardee		Hendry		Hernando	
		7,474		8,756		8,468		5,047		5,132	
DISEASE	Code No.	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0	0	0
Chancroid	44A	0	1	5	0	0	0	0	1	0	0
Chickenpox (Varicella)	38E	3	0	5	0	0	0	0	72	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0	0	0
Diphtheria	10	0	0	4	0	1	0	1	0	0	0
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	0	0	0
" Bacillary	27A	0	0	0	0	0	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0	0	0
German Measles	38D	0	0	1	0	0	0	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0	0	0
Gonorrhea	25	16	13	50	0	17	5	6	57	0	2
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0	0	0
Hookworm	40	13	3	311	0	0	0	1	25	0	1
Influenza	33	0	0	4	0	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0	0	0
Malaria	28	0	0	5	0	0	0	0	0	0	0
Measles (Rubeola)	35	34	0	32	0	2	0	5	0	0	0
Meningitis	6	0	0	2	0	0	0	0	0	0	0
Mumps (Parotitis)	44C	3	0	5	0	0	0	0	0	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	1	0	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	1	0	3	0	0	0	0	1	0	0
" Lobar	108	0	0	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	0	0	0
Poliomyelitis	36	0	0	0	0	0	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	0	6	0	3	2	1	0	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	1	4	0	0	0	0	0	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0	0	0
Syphilis	30	148	143	77	4	95	36	205	181	53	141
Tetanus	12	0	0	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	1	0	1	1	0	0	0	1	1	0
" Other Forms	14–22	0	0	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0	0	0
Typhoid Fever	1	1	0	3	0	4	0	0	0	1	0
Undulant Fever	5	0	0	0	0	0	0	0	0	0	0
Vincent's Angina	32B	0	0	0	0	0	0	0	0	0	0
Whooping Cough	9	0	0	13	0	0	0	0	0	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Highlands		Hillsboro		Holmes		Ind. River	
		14,047		197,419		13,629		9,329	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	1	0	0	0	0	0
Chancroid	44A	0	20	38	84	0	0	0	0
Chickenpox (Varicella)	38E	1	2	67	84	0	0	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	2	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	7	8	18	29	0	0	0	2
Dysentery, Amebiasis	27B	0	1	0	0	0	0	0	0
" Bacillary	27A	0	1	0	8	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	1	0	0	0	0	0	0
German Measles	38D	0	14	0	111	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	35	260	803	1,430	1	0	11	16
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	56	165	47	160	0	2	1	0
Influenza	33	0	8	19	206	1	0	0	0
Jaundice, Infectious	32A	0	0	0	6	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	9	0	3	0	0	0	0
Malaria	28	2	0	3	19	0	0	0	0
Measles (Rubeola)	35	7	8	451	93	23	0	4	3
Meningitis	6	0	1	3	25	0	0	0	0
Mumps (Parotitis)	44C	0	17	61	145	0	0	1	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	1	2	0	0	0	0	0
Pellagra	69	0	0	1	1	0	1	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	3	104	127	0	2	0	0
" Lobar	108	0	0	0	17	0	1	0	0
" Other	109	0	6	0	118	0	0	0	0
Poliomyelitis	36	0	0	2	6	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	1	7	34	47	0	5	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	2	0	29	43	0	0	0	0
Septic Sore Throat	115B	0	0	0	.1	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	1	0	0
Syphilis	30	344	299	2,437	2,921	18	51	210	279
Tetanus	12	0	0	2	0	0	0	0	0
Trachoma	83	0	0	0	2	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis. Pulmonary	13	1	2	108	102	3	2	1	0
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	1	0	0	0	0	0	0
Typhoid Fever	1	5	0	30	4	0	0	0	0
Undulant Fever	5	0	0	2	0	0	0	0	0
Vincent's Angina	32B	0	0	101	45	0	0	0	0
Whooping Cough	9	2	3	75	40	0	0	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Jackson		Jefferson		Lafayette		Lake	
		31,053		11,007		3,505		28,196	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	0	0	1	0	0	0	1	2
Chickenpox (Varicella)	38E	0	0	8	3	1	0	41	23
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	1	0	4	2	0	0	3	4
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	1
" Bacillary	27A	0	0	0	0	0	0	1	4
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	0	0	3	0	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	109	133	42	64	4	0	95	95
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	227	64	1,265	610	0	0	158	182
Influenza	33	0	2	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	0	0	3	0	0	0	1	0
Measles (Rubeola)	35	0	0	20	1	0	0	41	15
Meningitis	6	0	0	2	0	0	0	0	0
Mumps (Parotitis)	44C	0	1	14	4	0	0	15	26
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	2	4
Pellagra	69	0	0	0	0	0	0	0	1
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	0	0	0	0	0	0
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	0
Poliomyelitis	36	0	0	0	0	0	0	1	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	3	2	4	0	0	1	4	6
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	0	0	0	0	16	3
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	258	211	411	201	14	14	604	380
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	11	4	7	6	1	1	9	16
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	1	1	0	0	0	1	1
Undulant Fever	5	0	1	0	0	0	0	0	0
Vincent's Angina	32B	3	0	0	0	0	0	1	0
Whooping Cough	9	0	0	1	3	0	0	21	1
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Lee		Leon		Levy		Liberty	
		21,598		35,674		11,611		2,902	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	1	0	0	0	0	0
Chancroid	44A	0	1	8	17	0	2	0	0
Chickenpox (Varicella)	38E	1	4	3	4	5	0	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	4	0	6	5	0	0	0	0
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	0
" Bacillary	27A	0	0	18	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	1	1	1	3	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	108	39	1,111	687	15	62	0	1
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	4	17	236	142	59	61	0	0
Influenza	33	0	0	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	1	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	1	0	0	0	0
Malaria	28	0	9	7	2	0	0	0	0
Measles (Rubeola)	35	28	18	13	21	0	0	0	0
Meningitis	6	0	0	3	3	0	0	0	0
Mumps (Parotitis)	44C	4	7	0	10	1	3	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	3	0	0	22	0	0	1	0
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	2	0	0	0	0
Poliomyelitis	36	0	0	0	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	3	2	4	7	1	3	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	16	20	0	0	0	1
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	650	286	659	450	301	152	4	7
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	1	1	20	16	2	0	1	0
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	0	0	0	0	7	0
Undulant Fever	5	0	0	0	0	0	0	0	0
Vincent's Angina	32B	0	0	9	2	0	0	0	0
Whooping Cough	9	0	1	2	0	0	0	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Madison		Manatee		Marion		Martin	
		15,067		24,725		30,343		6,481	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	0	0	5	5	0	0	0	0
Chickenpox (Varicella)	38E	4	7	0	0	0	2	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	4
Diphtheria	10	0	0	1	1	1	1	0	0
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	1
" Bacillary	27A	0	0	0	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	0	0	0	0	0	0	0	6
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	13	38	35	187	27	77	2	8
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	0	556	0	0	0	0	1	0
Influenza	33	0	0	0	0	0	0	0	2
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	1	0	0	0	0	0	0	0
Measles (Rubeola)	35	0	1	0	0	3	1	0	4
Meningitis	6	0	0	0	0	1	0	0	3
Mumps (Parotitis)	44C	0	0	1	0	0	5	0	8
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	0	1	0	0	0	6
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	1
Poliomyelitis	36	0	0	0	0	1	4	0	2
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	6	2	3	0	1	9	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	0	2	0	0	3	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	235	476	563	218	359	1,026	66	95
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	1	0	4	5	1	4	0	1
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	1	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	0	0	5	2	0	0
Undulant Fever	5	0	0	0	0	0	2	0	0
Vincent's Angina	32B	0	0	0	0	0	0	0	6
Whooping Cough	9	0	8	0	0	0	2	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

		Counties							
		Monroe		Nassau		Okaloosa		Okeechobee	
		20,072		10,775		15,591		2,929	
DISEASE	Code No.	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	3	1	1	4	0	0	0	0
Chancroid	44A	1	5	6	6	0	7	0	0
Chickenpox (Varicella)	38E	4	4	4	39	0	7	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	4	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	3	0	0
Diphtheria	10	6	3	0	2	2	9	0	0
Dysentery, Amebiasis	27B	0	0	0	0	0	1	0	0
" Bacillary	27A	0	0	9	2	0	2	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	0	8	0	0	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	80	171	59	126	24	248	2	0
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	0	0	260	138	740	105	0	0
Influenza	33	0	0	3	18	0	48	0	0
Jaundice, Infectious	32A	0	0	0	0	0	1	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	1	0	0
Malaria	28	1	0	0	1	0	3	0	0
Measles (Rubeola)	35	47	16	27	0	0	1	0	0
Meningitis	6	0	1	0	0	0	4	0	0
Mumps (Parotitis)	44C	12	24	13	23	12	17	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	3	4	0	1	0	0
Pellagra	69	0	0	10	13	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	2	1	1	0	1	16	0	0
" Lobar	108	0	0	0	0	0	5	0	0
" Other	109	0	0	0	0	14	0	0	0
Poliomyelitis	36	1	0	2	1	0	1	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	1	3	5	1	0	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	4	6	0	1	0	2	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	147	308	309	202	141	171	2	72
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	3	8	24	22	2	3	0	0
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	2	0	1	3	0	0	0	0
Undulant Fever	5	0	0	0	0	0	0	0	0
Vincent's Angina	32B	0	0	0	3	0	2	0	0
Whooping Cough	9	0	10	28	51	0	25	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

		Counties							
		Orange		Osceola		Palm Beach		Pasco	
		79,448		9,687		88,356		13,322	
DISEASE	Code No.	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	24	69	2	0	16	24	2	0
Chickenpox (Varicella)	38E	77	441	0	0	31	167	0	2
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	3	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	3	0	0
Diphtheria	10	2	6	0	2	4	0	6	2
Dysentery, Amebiasis	27B	1	5	0	0	0	0	0	0
" Bacillary	27A	0	1	0	0	1	3	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	1	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	1	112	0	0	5	13	15	1
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	629	847	3	9	258	335	2	4
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	273	184	0	0	5	1	0	5
Influenza	33	1	31	0	0	4	87	2	3
Jaundice, Infectious	32A	0	0	0	0	0	6	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	17	0	0	0	8	0	0
Malaria	28	1	6	0	0	1	13	2	0
Measles (Rubeola)	35	135	101	13	0	150	47	2	1
Meningitis	6	1	11	0	0	0	11	0	2
Mumps (Parotitis)	44C	206	195	0	0	91	40	0	16
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	1	0	0	0	0	0	0
Paratyphoid Fever	2	0	4	0	0	0	0	0	0
Pellagra	69	0	1	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	2	17	0	0	1	25	0	0
" Lobar	108	0	0	0	0	0	7	0	0
" Other	109	0	10	0	0	0	12	0	0
Poliomyelitis	36	2	0	0	0	1	2	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	14	17	2	0	1	1	1	1
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	11	25	1	2	3	4	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	1	0	0	0	0	0	0
Syphilis	30	1,023	852	131	113	1,245	1,274	114	174
Tetanus	12	0	0	0	0	1	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	11	41	0	1	12	24	0	1
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	1	0	0	0	0	0	0	0
Typhoid Fever	1	1	1	1	1	4	7	7	0
Undulant Fever	5	3	0	1	0	0	3	0	0
Vincent's Angina	32B	1	1	0	0	0	55	0	0
Whooping Cough	9	51	129	4	0	22	71	7	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Pinellas 110,663 Total Last Year	Pinellas 110,663 Total This Year	Polk 90,356 Total Last Year	Polk 90,356 Total This Year	Putnam 17,806 Total Last Year	Putnam 17,806 Total This Year	St. Johns 20,182 Total Last Year	St. Johns 20,182 Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	10	8	5	12	0	0	0	2
Chickenpox (Varicella)	38E	46	222	0	3	0	1	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	2
Dengue	38F	1	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	1	0	1	0	0	0	0
Diphtheria	10	5	9	20	8	0	0	0	2
Dysentery, Amebiasis	27B	0	0	0	1	0	0	0	0
" Bacillary	27A	1	0	0	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	1	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	2	96	0	6	1	0	0	1
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	277	596	34	245	7	39	9	36
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	183	106	2	42	0	0	0	3
Influenza	33	3	77	0	64	0	0	0	0
Jaundice, Infectious	32A	0	1	0	1	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	0	2	1	5	2	1	0	1
Measles (Rubeola)	35	76	332	72	10	5	0	0	0
Meningitis	6	2	16	1	2	0	0	0	4
Mumps (Parotitis)	44C	17	71	0	5	0	3	0	2
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	1	0	0	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	10	20	0	14	0	0	0	0
" Lobar	108	0	2	0	1	0	0	0	0
" Other	109	0	2	0	16	0	0	0	0
Poliomyelitis	36	1	1	1	0	1	0	0	1
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	7	8	1	1	17	0	1	2
Rocky Mtn. Spot. Fev.	39C	1	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	14	11	6	9	0	0	0	0
Septic Sore Throat	115B	0	0	0	0	0	1	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	1,111	926	690	1,135	402	320	264	212
Tetanus	12	0	0	0	0	1	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	1	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	27	83	1	6	1	1	0	1
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	1	0	0	0	1	0
Typhoid Fever	1	36	1	3	3	2	0	2	1
Undulant Fever	5	2	8	0	0	0	0	0	0
Vincent's Angina	32B	1	2	0	8	0	0	0	5
Whooping Cough	9	89	33	0	0	2	0	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	St. Lucie 13,084 Total Last Year	St. Lucie 13,084 Total This Year	Santa Rosa 13,799 Total Last Year	Santa Rosa 13,799 Total This Year	Sarasota 19,514 Total Last Year	Sarasota 19,514 Total This Year	Seminole 21,080 Total Last Year	Seminole 21,080 Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	1	0	0
Chancroid	44A	0	0	0	0	3	1	1	0
Chickenpox (Varicella)	38E	0	0	1	0	7	0	20	21
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	0	0	7	5	6	0	2	2
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	0
" Bacillary	27A	0	0	0	0	0	0	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	0	0	0	0	0	1	0	4
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	14	105	27	18	94	46	93	210
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	2	0	1,594	351	0	0	318	175
Influenza	33	0	0	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	0	0	2	0	0	0	0	0
Measles (Rubeola)	35	0	0	11	0	234	4	2	15
Meningitis	6	0	1	1	2	0	0	0	1
Mumps (Parotitis)	44C	0	0	0	0	8	1	47	18
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	1	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	0
Pellagra	69	0	0	42	0	0	0	1	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	1	0	0	1	0	1
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	0
Poliomyelitis	36	0	0	2	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	0	0	1	7	2	0	0	2
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	0	1	2	8	0	0	1	2
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	127	339	58	55	570	181	1,169	589
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	0	0	5	2	2	2	20	8
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	0	0	0	1	2	0
Undulant Fever	5	0	0	0	0	1	0	1	0
Vincent's Angina	32B	0	0	1	0	1	0	0	5
Whooping Cough	9	0	0	1	0	4	0	6	34
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Sumter		Suwannee		Taylor		Union	
		9,532		16,029		9,682		7,228	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	0	0	0	0	0	0	0	0
Chancroid	44A	3	0	0	0	0	0	0	0
Chickenpox (Varicella)	38E	0	0	8	0	1	15	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	0	0	0	1	5	1	4	0
Dysentery, Amebiasis	27B	0	0	0	0	0	0	0	0
" Bacillary	27A	0	0	0	0	0	0	0	1
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	0	0	0	0	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	14	165	9	10	75	58	1	6
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	0	0	0	0	454	282	0	1
Influenza	33	0	0	0	0	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	0	0	0	0	5	0	0	0
Measles (Rubeola)	35	0	0	0	0	7	11	0	0
Meningitis	6	0	0	2	2	0	0	0	1
Mumps (Parotitis)	44C	0	0	0	0	13	19	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	0	0	0	0	0	0	0
Paratyphoid Fever	2	0	0	0	0	0	0	0	0
Pellagra	69	0	0	0	0	0	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	0	0	0	0	1	2	0	1
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	0
Poliomyelitis	36	0	0	1	0	1	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	1	0	0
" Animal	38B	0	0	0	0	0	0	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	1	1	4	1	2	4	0	0
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	1	0	1	0	1	0	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	227	190	259	377	301	127	24	258
Tetanus	12	0	0	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	0	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	0	0	0	1	13	14	0	11
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	0	0	1	1	1	0	0	0
Undulant Fever	5	0	0	1	0	0	0	0	0
Vincent's Angina	32B	0	0	0	0	0	0	0	0
Whooping Cough	9	0	0	0	0	5	0	0	1
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 9.—MORBIDITY REPORT OF REPORTABLE DISEASES BY COUNTIES FOR YEAR ENDING DECEMBER 31, 1943.—(Cont.)

DISEASE	Code No.	Counties							
		Volusia		Wakulla		Walton		Washington	
		53,099		5,717		13,284		10,900	
		Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year	Total Last Year	Total This Year
Anthrax	7	0	0	0	0	0	0	0	0
Beriberi	68	0	0	0	0	0	0	0	0
Botulism	177	0	0	0	0	0	0	0	0
Cancer	45–55	8	0	0	0	0	0	0	0
Chancroid	44A	3	1	0	22	0	0	0	0
Chickenpox (Varicella)	38E	21	53	0	8	0	1	0	0
Cholera, Asiatic	4	0	0	0	0	0	0	0	0
Conjunctivitis (Pink Eye)	88	0	0	0	0	0	0	0	0
Dengue	38F	0	0	0	0	0	0	0	0
Diarrhea, Infantile	119–120A	0	0	0	0	0	0	0	0
Diphtheria	10	14	12	0	0	5	4	0	0
Dysentery, Amebiasis	27B	0	3	0	0	0	6	0	0
" Bacillary	27A	0	1	0	0	0	1	0	0
" Other	27C	0	0	0	0	0	0	0	0
Encephalitis, Epi.	37C	0	0	0	0	0	0	0	0
Erysipelas	11	0	0	0	0	0	0	0	0
German Measles	38D	1	1	0	1	0	0	0	0
Glanders	26B	0	0	0	0	0	0	0	0
Gonorrhea	25	83	260	15	290	12	45	0	22
Granuloma Inguinale	44A	0	0	0	0	0	0	0	0
Hookworm	40	10	96	234	32	1,608	385	10	256
Influenza	33	2	1	0	13	0	0	0	0
Jaundice, Infectious	32A	0	0	0	0	0	0	0	0
Leprosy	23	0	0	0	0	0	0	0	0
Lymphopathia Ven.	44A	0	0	0	0	0	0	0	0
Malaria	28	1	6	1	0	1	0	0	1
Measles (Rubeola)	35	179	13	6	1	24	0	0	0
Meningitis	6	0	1	1	1	4	0	0	0
Mumps (Parotitis)	44C	14	71	0	30	0	1	0	0
Mycosis, Actinomycosis	43A	0	0	0	0	0	0	0	0
" Blastomycosis	43B	0	0	0	0	0	0	0	0
" Favus	43F	0	0	0	0	0	0	0	0
Opthalmia Neonatorum	25	0	2	1	0	0	0	0	0
Paratyphoid Fever	2	0	4	0	0	0	1	0	0
Pellagra	69	0	0	0	0	1	0	0	0
Plague	3	0	0	0	0	0	0	0	0
Pneumonia, Broncho	107	2	1	0	0	0	0	0	1
" Lobar	108	0	0	0	0	0	0	0	0
" Other	109	0	0	0	0	0	0	0	0
Poliomyelitis	36	0	0	0	0	0	0	0	0
Psittacosis	38F	0	0	0	0	0	0	0	0
Puerperal Infection	147B	0	0	0	0	0	0	0	0
Rabies, Human	38B	0	0	0	0	0	0	0	0
" Animal	38B	0	0	0	0	0	1	0	0
Rickettsial Diseases	39	0	0	0	0	0	0	0	0
Brills or Typhus	39A	26	8	1	0	1	2	0	4
Rocky Mtn. Spot. Fev.	39C	0	0	0	0	0	0	0	0
Scarlet Fev. (Scarletina)	8	3	9	4	0	0	0	0	0
Septic Sore Throat	115B	0	0	0	0	0	0	0	0
Smallpox (Variola)	34	0	0	0	0	0	0	0	0
Syphilis	30	943	660	85	111	164	46	45	141
Tetanus	12	0	5	0	0	0	0	0	0
Trachoma	88	0	0	0	0	0	0	0	0
Trichinosis	42	1	0	0	0	0	0	0	0
Tuberculosis, Pulmonary	13	18	24	3	1	10	7	3	2
" Other Forms	14–22	0	0	0	0	0	0	0	0
Tularemia	26A	0	0	0	0	0	0	0	0
Typhoid Fever	1	8	3	0	0	0	1	0	0
Undulant Fever	5	3	1	0	0	0	0	0	1
Vincent's Angina	32B	0	12	0	0	0	0	0	0
Whooping Cough	9	11	8	0	29	1	1	0	0
Yellow Fever	38A	0	0	0	0	0	0	0	0
Other Diseases: Giardiasis	29	0	0	0	0	0	0	0	0
Ascariasis		0	0	0	0	0	0	0	0
Oxyuriasis		0	0	0	0	0	0	0	0
Trichuriasis		0	0	0	0	0	0	0	0
Tapeworm		0	0	0	0	0	0	0	0
Catarrhal Fever		0	0	0	0	0	0	0	0

TABLE 10.—CASES OF SMALLPOX REPORTED BY COUNTIES BY YEARS 1930-1943, FLORIDA

County	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Alachua	0	0	0	0	0	0	0	2	0	0	0	0	0	0
Baker	0	0	4	0	0	0	0	0	0	0	0	0	0	0
Bay	0	1	0	0	0	0	0	0	0	0	0	0	1	0
Bradford	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Brevard	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Broward	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Calhoun	0	2	0	0	0	0	0	0	0	0	0	0	0	0
Charlotte	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Citrus	0	0	0	0	0	1	0	1	2	0	0	0	0	0
Clay	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Collier	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Columbia	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dade	0	2	0	0	0	0	0	0	0	0	0	0	0	0
DeSoto	0	0	0	0	0	0	0	0	0	9	0	0	0	0
Dixie	1	0	0	0	0	0	0	0	2	0	1	0	0	0
Duval	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Escambia	0	1	0	0	0	0	0	0	2	0	0	0	0	0
Flagler	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Franklin	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gadsden	0	3	0	0	0	0	0	0	0	0	1	0	0	0
Gilchrist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Glades	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Gulf	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hamilton	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hardee	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hendry	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hernando	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Highlands	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hillsboro	1	0	0	0	0	0	0	0	1	1	0	0	0	0
Holmes	2	0	0	0	0	0	0	0	0	0	0	0	0	1
Indian River	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jackson	0	0	13	0	0	0	0	0	1	0	0	0	0	0
Jefferson	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lafayette	0	1	1	0	0	0	0	0	0	0	0	0	0	0
Lake	3	0	0	0	0	0	0	0	0	0	1	0	0	0
Lee	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Leon	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Levy	0	0	0	0	0	13	0	0	0	0	0	0	0	0
Liberty	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Madison	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Manatee	6	0	0	0	0	0	0	0	0	0	0	0	0	0
Marion	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Martin	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Monroe	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nassau	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Okaloosa	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Okeechobee	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Orange	5	0	0	0	0	0	0	0	0	1	1	0	0	1
Osceola	0	7	0	0	0	0	0	0	0	0	0	0	0	0
Palm Beach	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pasco	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pinellas	2	0	1	0	0	0	0	0	0	0	0	0	0	0
Polk	4	1	2	0	0	0	0	0	0	0	0	0	0	0
Putnam	1	1	0	0	0	0	0	0	0	0	0	0	0	0
St. Johns	0	2	0	0	2	0	0	0	0	0	0	0	0	0
St. Lucie	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Santa Rosa	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sarasota	0	3	0	0	0	0	0	0	0	0	0	0	0	0
Seminole	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sumter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Suwannee	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Taylor	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Union	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Volusia	1	1	2	0	0	0	0	5	7	0	2	0	0	0
Wakulla	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Walton	0	0	9	0	1	0	0	0	0	0	0	0	0	0
Washington	0	1	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	27	27	32	1	3	14	0	8	15	4	7	0	1	2

TABLE 11.—CASES OF DIPHTHERIA REPORTED BY COUNTIES BY YEARS 1930-1943, FLORIDA.

County	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Alachua	0	5	10	3	2	1	1	5	2	2	2	2	5	3
Baker	1	0	2	0	0	0	2	0	0	0	0	0	5	4
Bay	4	5	0	3	2	0	0	7	1	10	4	0	6	2
Bradford	0	3	1	2	1	0	0	5	2	1	0	3	1	2
Brevard	0	4	7	1	0	1	1	1	2	1	0	0	0	0
Broward	12	3	6	9	7	3	14	4	9	5	5	3	7	3
Calhoun	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Charlotte	0	1	1	0	0	0	0	0	0	0	0	0	0	0
Citrus	2	3	2	0	0	1	1	1	0	0	0	0	1	0
Clay	0	1	1	3	0	0	0	0	0	0	0	5	25	0
Collier	1	0	0	1	4	0	0	0	0	0	0	0	0	0
Columbia	5	1	8	2	4	7	3	1	3	2	1	0	10	1
Dade	117	77	85	52	62	65	33	51	24	26	10	9	16	6
DeSoto	2	3	7	2	0	0	0	7	1	0	0	0	0	0
Dixie	0	0	0	0	0	0	0	142	0	0	0	0	0	0
Duval	71	62	164	121	96	105	61	31	107	72	53	47	46	65
Escambia	7	12	31	21	12	13	4	0	49	8	8	4	7	33
Flagler	0	1	0	0	1	0	0	0	0	0	0	1	0	0
Franklin	1	1	3	0	0	0	0	5	0	0	1	0	3	0
Gadsden	8	7	3	2	2	1	1	0	1	6	1	5	12	3
Gilchrist	0	0	0	0	0	0	0	1	0	3	0	0	0	0
Glades	1	3	6	1	6	0	1	0	2	0	0	0	0	1
Gulf	0	0	0	0	0	0	0	0	3	3	1	1	0	0
Hamilton	0	0	0	1	0	0	0	3	0	0	3	5	4	0
Hardee	3	7	5	1	2	1	1	5	2	1	4	9	1	0
Hendry	0	1	3	0	0	0	1	0	0	0	0	0	1	0
Hernando	0	2	0	0	0	0	2	0	0	0	0	0	0	0
Highlands	4	8	10	3	4	3	3	8	4	6	3	7	7	8
Hillsboro	106	95	146	86	153	101	46	79	128	54	46	33	18	29
Holmes	1	1	5	1	2	1	0	1	0	1	0	0	0	0
Indian River	1	2	3	5	0	2	0	2	0	0	1	0	0	2
Jackson	1	8	2	3	0	0	1	24	0	1	0	3	1	0
Jefferson	2	0	0	2	1	0	0	0	0	1	2	4	4	2
Lafayette	0	0	1	0	3	1	2	1	0	0	0	0	0	0
Lake	9	8	17	2	4	1	1	6	1	2	4	0	3	4
Lee	2	1	6	7	0	2	0	2	2	0	1	0	4	5
Leon	9	10	8	8	1	0	2	1	4	3	7	2	6	0
Levy	0	2	0	0	0	0	0	1	2	0	0	1	0	0
Liberty	0	7	0	0	0	0	0	1	0	0	0	0	0	0
Madison	0	3	1	1	0	1	1	4	2	0	0	0	0	0
Manatee	4	8	18	0	2	0	5	9	7	2	0	3	1	1
Martin	1	0	0	0	0	0	1	1	0	0	0	0	0	0
Marion	4	1	2	5	1	2	1	13	6	0	6	0	1	1
Monroe	1	0	0	0	0	0	4	9	1	3	1	0	6	3
Nassau	0	2	7	0	0	1	0	0	4	0	0	4	0	2
Okaloosa	0	0	1	0	0	0	0	0	1	0	0	2	2	9
Okeechobee	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Orange	13	7	13	8	8	19	29	39	11	17	17	9	2	6
Osceola	0	1	0	2	1	0	0	0	0	2	1	1	0	2
Palm Beach	3	1	12	11	13	8	18	18	6	2	1	1	4	0
Pasco	2	7	5	7	13	3	4	1	0	2	1	0	6	2
Pinellas	11	8	3	32	14	27	6	39	31	11	8	9	5	9
Polk	44	36	49	7	23	28	22	26	41	17	16	16	20	8
Putnam	0	1	4	2	3	6	1	3	7	1	0	1	0	0
St. Johns	3	3	1	1	3	4	5	1	2	0	0	0	0	2
St. Lucie	2	4	5	1	2	1	1	3	1	1	1	0	0	0
Santa Rosa	0	0	2	2	3	0	0	2	0	0	0	4	7	5
Sarasota	8	14	9	9	16	4	9	11	6	3	6	4	6	0
Seminole	4	6	4	7	2	0	7	6	0	0	0	0	2	2
Sumter	2	0	2	3	3	4	1	2	0	0	0	2	0	0
Suwannee	10	2	0	0	1	3	2	5	0	0	1	1	0	1
Taylor	3	17	14	4	2	1	1	5	3	0	1	2	5	1
Union	2	2	0	0	2	0	1	4	2	0	0	0	4	0
Volusia	4	16	38	5	6	2	9	17	10	26	5	7	14	12
Wakulla	0	0	0	0	1	1	0	0	0	2	1	1	0	0
Walton	0	0	1	3	0	0	0	1	0	1	0	0	5	4
Washington	0	0	1	0	3	1	0	0	0	1	0	1	0	0
TOTAL	492	483	735	452	491	425	309	615	490	299	223	212	258	243

TABLE 12.—CASES OF TYPHOID FEVER REPORTED BY COUNTIES BY YEARS 1930-1943, FLORIDA.

County	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Alachua	1	0	1	0	0	4	0	3	3	0	0	1	0	4
Baker	0	0	2	0	0	0	0	1	1	0	1	3	1	0
Bay	1	0	7	2	0	1	0	4	0	0	0	0	0	2
Bradford	0	0	2	0	1	1	0	0	1	0	0	0	0	0
Brevard	0	0	2	2	0	0	0	0	0	0	0	0	0	2
Broward	3	6	3	5	2	0	1	1	6	2	6	1	1	0
Calhoun	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Charlotte	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Citrus	0	0	2	0	7	0	0	1	3	4	0	0	1	1
Clay	0	0	2	0	0	0	0	0	0	0	0	6	1	0
Collier	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Columbia	0	1	6	0	0	1	0	1	0	2	1	1	2	2
Dade	14	10	15	26	23	13	18	25	19	18	43	20	11	2
DeSoto	0	1	0	0	0	0	0	1	0	0	0	0	0	0
Dixie	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Duval	13	11	21	14	11	8	8	16	49	13	8	36	23	6
Escambia	7	31	68	21	7	16	3	10	21	11	4	6	11	8
Flagler	0	0	0	0	0	0	3	2	0	0	0	0	0	0
Franklin	0	2	0	0	1	1	0	0	1	0	0	0	1	3
Gadsden	1	11	8	3	2	0	0	1	3	6	2	16	12	6
Gilchrist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Glades	0	1	0	1	0	0	0	0	0	0	0	0	0	0
Gulf	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Hamilton	0	0	1	0	3	0	0	0	0	0	0	0	3	0
Hardee	0	0	1	0	0	0	1	0	0	0	0	1	4	0
Hendry	3	0	0	0	0	0	0	0	0	0	0	1	0	0
Hernando	0	0	1	1	2	0	3	0	0	0	0	0	1	0
Highlands	0	2	7	0	0	3	1	0	0	5	1	1	5	0
Hillsboro	45	37	28	20	18	54	23	19	12	17	8	9	30	4
Holmes	3	7	4	7	3	0	0	1	0	0	0	0	0	0
Indian River	2	0	3	1	0	0	0	2	0	0	1	10	0	0
Jackson	0	3	3	1	1	0	0	2	4	0	0	1	0	1
Jefferson	3	2	5	4	0	0	0	0	0	0	0	5	1	0
Lafayette	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lake	1	0	2	3	11	1	0	2	5	2	5	0	1	1
Lee	0	10	1	0	0	1	0	2	0	0	1	0	0	0
Leon	4	8	10	6	7	3	1	0	0	0	2	2	0	0
Levy	0	0	0	0	2	0	1	0	0	0	0	0	0	0
Liberty	1	0	0	1	0	1	0	0	0	0	0	0	7	0
Madison	0	1	1	2	6	2	0	0	0	1	0	2	0	0
Manatee	0	0	3	0	4	0	0	0	1	0	0	0	0	0
Marion	2	1	5	2	2	2	1	1	0	4	0	1	5	2
Martin	0	0	0	0	0	0	1	0	1	1	0	0	0	0
Monroe	0	0	0	1	0	0	0	0	0	0	0	0	2	0
Nassau	1	0	5	0	0	0	1	1	2	4	0	1	1	3
Okaloosa	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Okeechobee	0	0	0	0	0	0	0	0	2	0	0	0	0	0
Orange	1	3	7	1	1	2	8	7	8	2	4	9	1	1
Osceola	3	0	2	0	0	4	0	1	0	0	0	0	1	1
Palm Beach	2	1	4	22	1	8	1	4	0	4	1	3	4	7
Pasco	1	0	1	6	0	0	1	0	2	1	1	0	7	0
Pinellas	2	3	2	2	1	8	7	7	6	21	7	8	36	1
Polk	6	21	12	2	4	19	5	1	2	1	4	0	3	3
Putnam	0	1	2	0	0	0	0	2	2	0	0	0	2	0
St. Johns	3	0	4	1	0	0	0	1	0	0	0	2	2	1
St. Lucie	0	0	0	0	0	1	0	0	0	0	0	5	0	0
Santa Rosa	0	0	1	0	0	0	0	1	0	0	0	0	0	0
Sarasota	0	2	1	3	3	4	2	2	0	0	0	0	0	1
Seminole	4	1	2	2	0	0	0	0	0	2	0	3	2	0
Sumter	0	0	1	0	0	0	0	0	0	0	0	0	0	0
Suwannee	0	0	2	0	0	2	0	0	1	0	1	0	1	1
Taylor	2	0	0	1	1	0	1	2	1	2	1	1	1	0
Union	4	3	1	0	1	1	1	0	0	0	0	0	0	0
Volusia	5	2	5	19	3	3	1	3	3	5	7	11	8	3
Wakulla	1	1	0	1	0	4	0	0	1	0	0	0	0	0
Walton	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Washington	1	0	0	0	1	1	0	0	0	0	0	0	0	0
TOTAL	141	184	266	183	129	169	94	127	160	128	109	166	196	68

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
1. Typhoid Fever											
Deaths:	Total	17	26	26	23	27	46	45	39	58	46
White	Male	4	15	8	7	11	17	18	9	19	13
	Female	2	3	3	9	3	9	9	5	7	8
Colored	Male	4	* 5	8	3	5	10	11	14	12	13
	Female	7	3	7	4	8	10	7	11	20	12
Rates:	Total	0.9	1.4	1.4	1.2	1.5	2.6	2.6	2.3	3.6	2.9
White		0.4	1.3	0.8	1.1	1.0	2.0	2.2	1.2	2.3	1.9
Colored		2.1	1.5	2.9	1.4	2.6	4.0	3.7	5.2	6.8	5.4

Paratyphoid Fever 1917-1920 included in Typhoid Fever figures No. 1 (above)

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
2. Paratyphoid Fever											
Deaths:	Total	3	2	3	2	1	1	3	0	2	1
White	Male	1	1	0	0	1	1	2	0	2	1
	Female	1	0	2	1	0	0	1	0	0	0
Colored	Male	1	0	1	1	0	0	0	0	0	0
	Female	0	1	0	0	0	0	0	0	0	0
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
3. Bubonic Plague											
Deaths:	Total	0	0	0	0	0	0	0	0	0	0
White	Male										
	Female										
Colored	Male										
	Female										
Rates:	Total										
White											
Colored											

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
5. Undulant Fever											
Deaths:	Total	1	1	2	3	5	3	3	2	3	1
White	Male	1	1	1	3	4	0	2	2	2	1
	Female	0	0	1	0	1	2	0	0	1	0
Colored	Male	0	0	0	0	0	1	1	0	0	0
	Female	0	0	0	0	0	0	0	0	0	0
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

6. Cerebrospinal Meningitis

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	43	13	16	8	12	18	66	58	13	8
White	Male	23	5	3	5	5	5	17	20	6	6
	Female	15	3	7	0	3	5	12	10	3	0
Colored	Male	3	1	4	3	4	5	25	18	4	2
	Female	2	4	2	0	0	3	12	10	0	0
Rates:	Total	2.2	0.7	0.8	0.4	0.6	1.0	3.8	3.5	0.8	0.5
White		2.7	0.6	0.7	0.4	0.6	0.8	2.3	2.5	0.8	0.5
Colored		1.0	1.0	1.2	0.6	0.8	1.6	7.6	5.8	0.9	0.4

7. Anthrax

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	0	0	0	0	0	0	0	1	0	0
White	Male								0		
	Female								0		
Colored	Male								1		
	Female								0		
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

8. Scarlet Fever

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	4	3	2	1	6	4	2	2	1	5
White	Male	1	1	1	0	0	2	0	1	1	1
	Female	2	1	0	1	5	1	2	1	0	4
Colored	Male	0	1	0	0	1	1	0	0	0	0
	Female	1	0	1	0	0	0	0	0	0	0
Rates:	Total										
White											
Colored											

9. Whooping Cough

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	69	48	38	39	60	68	59	25	59	110
White	Male	20	16	9	12	13	18	13	8	18	33
	Female	12	9	10	11	17	19	17	7	13	26
Colored	Male	29	13	4	8	13	12	6	5	13	29
	Female	8	10	15	8	17	19	23	5	15	22
Rates:	Total	3.6	2.5	2.0	2.0	3.2	3.8	3.4	1.5	3.6	6.9
White		2.3	1.8	1.4	1.6	2.2	2.9	2.4	1.3	2.7	5.2
Colored		7.1	4.4	3.7	3.1	5.9	6.2	5.9	2.1	6.0	11.0

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

10. Diphtheria

		1943	1942	1941	1940	1039	1938	1937	1936	1935	1934
Deaths:	Total	26	28	23	28	33	32	55	57	58	84
White	Male	13	13	8	6	16	14	25	24	28	42
	Female	8	8	10	14	9	8	17	23	25	27
Colored	Male	4	4	2	7	5	9	5	5	3	8
	Female	1	3	3	1	3	1	8	5	2	7
Rates:	Total	1.4	1.5	1.2	1.5	1.8	1.8	3.2	3.4	3.6	5.3
White		1.5	1.5	1.3	1.4	1.9	1.7	3.4	3.9	4.6	6.1
Colored		1.0	1.4	1.0	1.5	1.6	2.0	2.7	2.1	1.1	3.2

11. Erysipelas

		1943	1942	1941	1940	1039	1938	1937	1936	1935	1934
Deaths:	Total	9	3	4	8	13	16	10	27	17	18
White	Male	7	2	1	2	4	10	3	17	7	5
	Female	2	1	2	5	8	3	5	9	8	11
Colored	Male	0	0	0	1	1	2	1	0	1	1
	Female	0	0	1	0	0	1	1	1	1	1
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

12. Tetanus

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	50	28	31	59	37	57	51	45	51	55
White	Male	11	* 8	8	13	5	13	10	12	8	10
	Female	7	2	4	0	3	15	6	5	4	11
Colored	Male	15	16	12	29	19	16	17	21	27	24
	Female	17	2	7	17	10	13	18	7	12	10
Rates:	Total	2.6	1.5	1.6	3.1	2.0	3.2	2.9	2.7	3.1	3.5
White		1.3	0.7	0.9	0.9	0.6	2.2	1.3	1.4	1.0	1.9
Colored		6.2	3.5	3.7	8.9	5.7	5.8	7.2	5.8	8.3	7.4

13-22. Tuberculosis (All Forms)

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	834	859	916	961	921	987	966	905	903	953
White	Male	237	244	239	275	241	243	248	254	250	233
	Female	126	116	123	104	135	164	152	133	147	148
Colored	Male	241	257	296	311	277	299	313	283	261	289
	Female	230	242	258	271	268	281	253	235	245	283
Rates:	Total	43.6	44.9	47.9	50.3	49.7	55.0	55.6	53.9	55.7	60.1
White		26.0	25.8	26.0	27.2	27.9	31.4	32.0	32.3	34.5	33.9
Colored		91.0	96.4	107.0	112.4	107.3	116.4	115.8	108.2	107.9	123.9

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

23. Leprosy

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	0	0	0	0	0	0	3	0	0	0
White	Male							2			
	Female							1			
Colored	Male							0			
	Female							0			
Rates:	Total										
White											
Colored											

24. Septicemia

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	30	40	27	32	31	27	37	25	37	33
White	Male	11	8	7	8	14	7	12	11	9	12
	Female	9	11	8	10	11	8	12	8	14	9
Colored	Male	4	7	3	7	3	5	5	2	3	5
	Female	6	14	9	7	3	7	8	4	11	7
Rates:	Total	1.6	2.1	1.4	1.7	1.7	1.5	2.1	1.5	2.3	2.1
White		1.4	1.4	1.1	1.3	1.9	1.2	1.9	1.6	2.0	1.9
Colored		1.9	4.1	2.3	2.7	1.2	2.4	2.7	1.3	3.0	2.6

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

25. Gonococcus Infection

		1943	1942	1941	1940	1938	1939	1937	1936	1935	1934
Deaths:	Total	15	18	9	17	12	19	11	22	31	33
White	Male	2	1	0	0	0	0	3	3	1	2
	Female	2	0	3	3	2	1	1	6	10	5
Colored	Male	3	3	0	2	2	3	2	3	8	8
	Female	8	14	6	12	8	15	5	10	12	18
Rates:	Total										
White											
Colored											

26. Other Diseases Due to Bacteria — Does not include Tularemia prior to 1941

		1943	1942	1941	1940	1938	1939	1937	1936	1935	1934
Deaths:	Total	0	0	0	0	0	0	0	0	0	0
White	Male										
	Female										
Colored	Male										
	Female										
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

27. Dysentery (All Forms)

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	38	37	34	29	41	44	30	46	48	33
White	Male	12	7	9	6	13	11	10	12	14	12
	Female	10	7	6	6	10	7	5	10	8	8
Colored	Male	8	10	13	9	7	12	4	13	12	7
	Female	8	13	6	8	11	14	11	11	14	6
Rates:	Total	2.0	1.9	1.8	1.5	2.2	2.5	1.7	2.7	3.0	2.1
White		1.6	1.0	1.1	0.9	1.7	1.4	1.2	1.8	1.9	1.8
Colored		3.1	4.4	3.7	3.3	3.5	5.2	3.1	5.0	5.5	2.8

28. Malaria

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	41	48	85	99	112	166	205	349	331	445
White	Male	4	11	16	23	26	38	59	96	107	128
	Female	7	6	14	17	24	34	41	62	89	107
Colored	Male	12	11	27	26	25	42	61	106	75	110
	Female	18	20	28	33	37	52	44	85	60	100
Rates:	Total	2.1	2.5	4.4	5.2	6.0	9.2	11.8	20.8	20.4	28.1
White		0.8	1.2	2.2	2.9	3.7	5.6	8.0	13.2	17.0	20.9
Colored		5.8	6.0	10.6	11.4	12.2	18.9	21.5	39.9	28.8	45.5

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

29. Other Parasitic Diseases — Includes No. 32 Prior to 1941

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	0	0	1	1	0	0	1	4	0	0
White	Male			0	0			1	1		
	Female			1	1			0	3		
Colored	Male			0	0			0	0		
	Female			0	0			0	0		
Rates:	Total										
White											
Colored											

30. Syphilis

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	401	379	508	445	447	440	464	391	425	485
White	Male	93	92	104	76	72	71	85	61	85	73
	Female	17	27	35	34	19	30	34	28	23	21
Colored	Male	207	177	248	216	238	222	207	214	212	273
	Female	84	83	121	119	118	117	138	88	105	118
Rates:	Total	21.0	19.8	26.6	23.3	24.1	24.5	26.7	23.3	26.2	30.6
White		7.9	8.5	10.0	7.9	6.8	7.8	9.5	7.4	9.4	8.4
Colored		56.2	50.2	71.3	64.7	70.1	68.0	70.6	63.1	67.6	84.7

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

31. Relapsing Fever

		1943	1942	1941	1940	1039	1938	1937	1936	1935	1934
Deaths:	Total	0	0	0	0	0	0	0	1	0	0
White	Male								1		
	Female								0		
Colored	Male								0		
	Female								0		
Rates:	Total										
White											
Colored											

32. Other Diseases Due to Spirochetes (Included in No. 29 prior to 1941)

		1943	1942	1941	1940	1039	1938	1937	1936	1935	1934
Deaths:	Total	7	7	5							
White	Male	2	4	2							
	Female	0	2	1							
Colored	Male	2	0	1							
	Female	3	1	1							
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

33. Influenza

		1943	1942	1941	1940	1939	1938	1937	1936	1935	193
Deaths:	Total	466	293	543	569	529	393	658	880	624	394
White	Male	141	51	153	151	144	111	181	280	168	99
	Female	99	66	134	143	103	75	142	213	158	98
Colored	Male	111	92	149	135	144	106	184	228	155	116
	Female	115	84	107	140	138	101	151	159	143	81
Rates:	Total	24.4	15.3	28.4	29.8	28.5	21.9	37.9	52.4	38.5	24.8
White		17.2	8.4	20.6	21.1	18.4	14.3	25.9	41.1	28.3	17.5
Colored		43.6	34.0	49.4	53.1	55.5	41.5	68.6	80.8	63.5	42.7

34. Smallpox

		1943	1942	1941	1940	1939	1938	1937	1936	1935	193
Deaths:	Total	1	0	0	1	0	0	0	0	0	0
White	Male	1			0						
	Female	0			1						
Colored	Male	0			0						
	Female	0			0						
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

35. Measles

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	7	56	17	7	15	30	5	7	34	110
White	Male	2	16	5	2	6	11	2	1	14	50
	Female	4	17	10	3	3	11	2	4	17	34
Colored	Male	1	10	1	2	2	6	1	1	1	11
	Female	0	13	1	0	4	2	0	1	2	15
Rates:	Total	0.4	2.9	0.9	0.4	0.8	1.7	0.3	0.4	2.1	6.9
White		0.4	2.4	1.1	0.4	0.7	1.7	0.3	0.4	2.7	7.5
Colored		0.2	2.4	0.4	0.4	1.2	1.6	0.2	0.4	0.6	5.6

36. Acute Poliomyelitis & Acute Polioencephalitis

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	5	4	34	7	7	8	6	8	7	5
White	Male	3	0	19	4	3	3	2	2	5	4
	Female	0	2	11	2	1	4	1	3	0	0
Colored	Male	1	0	2	0	2	1	3	2	1	0
	Female	1	2	2	1	1	0	0	1	1	1
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

37. Acute Infectious Encephalitis

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	10	2	8	5	9	10	5	9	1	5
White	Male	6	2	6	5	6	2	4	2	0	2
	Female	3	0	1	0	3	3	1	5	1	3
Colored	Male	0	0	0	0	0	3	0	1	0	0
	Female	1	0	1	0	0	2	0	1	0	0
Rates:	Total										
White											
Colored											

38. Other Diseases Due to Filtrable Viruses Prior to 1941 Does Not Include Herpes Zoster

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	8	2	3	3	1	6	3	5	0	4
White	Male	3	0	2	1	0	3	1	3	0	2
	Female	1	0	1	1	0	1	1	0	0	0
Colored	Male	2	1	0	0	1	2	0	1	0	1
	Female	2	1	0	1	0	0	1	1	0	1
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

39. Typhus Fever

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	21	23	13	15	7	10	12	9	5	8
White	Male	10	10	8	5	4	5	8	5	3	4
	Female	6	6	4	4	2	3	3	4	2	2
Colored	Male	4	5	0	4	0	0	0	0	0	1
	Female	1	2	1	2	1	2	1	0	0	1
Rates:	Total										
White											
Colored											

40. Ankylostomiasis

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	5	2	2	10	6	2	3	1	4	5
White	Male	0	1	1	1	3	1	0	1	2	3
	Female	1	1	1	7	1	1	0	0	1	0
Colored	Male	1	0	0	1	0	0	0	0	0	1
	Female	3	0	0	1	2	0	3	0	1	1
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

41. Hydatid Disease

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	0	0	0	0	0	0	1	0	2	0
White	Male							0		0	
	Female							1		1	
Colored	Male							0		1	
	Female							0		0	
Rates:	Total										
White											
Colored											

42. Other Diseases Caused By Helminths

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	5	5	4	1	4	5	7	12	9	12
White	Male	1	2	1	1	0	0	2	1	3	2
	Female	2	0	1	0	0	1	1	0	0	1
Colored	Male	1	2	1	0	2	4	2	7	2	3
	Female	1	1	1	0	2	0	2	4	4	6
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DEATHS AND DEATH RATES* OF INFECTIOUS AND PARASITIC DISEASES (INT. LIST OF CAUSES OF DEATH 1-44) BY CAUSE, COLOR, AND SEX, FLORIDA, (RECORDED) 1917-1943

(Rates are Given for the More Prevalent Diseases Only)

43 Mycoses

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	6	5	3	4	3	5	5	2	1	3
White	Male	5	4	1	3	3	2	4	1	0	2
	Female	0	0	0	0	0	1	0	1	0	0
Colored	Male	1	1	1	1	0	2	0	0	0	0
	Female	0	0	1	0	0	0	1	0	1	1
Rates:	Total										
White											
Colored											

44. Other Infectious and Parasitic Diseases Includes Tularemia prior to 1941

		1943	1942	1941	1940	1939	1938	1937	1936	1935	1934
Deaths:	Total	36	37	34	24	25	21	16	16	11	12
White	Male	13	21	21	10	16	8	8	9	5	7
	Female	9	5	1	10	3	6	5	5	3	2
Colored	Male	10	8	5	2	5	5	3	1	2	1
	Female	4	3	7	2	1	2	0	1	1	1
Rates:	Total										
White											
Colored											

*Deaths per 100,000 Population

Florida State Board of Health
Bureau of Vital Statistics

DENTAL HEALTH

DREW H. TURNER, D.D.S. Acting Director

Effective June 1, 1943, Lloyd N. Harlow, D.D.S., director of the Bureau since 1938, resigned and from that date the assistant director has served not only as field dentist but also as director of the Bureau.

The program for 1943, as for 1942, was predominantly educational and remedial and in spite of reduced personnel and other difficulties, appreciable results were attained.

To the Florida State Dental Society and its components, sincere appreciation is extended for their active cooperation in the Bureau's plan for promoting dental health and dental health education.

Appreciation is also expressed to the various departments of the State Board of Health which have assisted in the operation of the Bureau's program. In this connection, special mention should be made of the Bureau of Health Education.

DENTAL HEALTH EDUCATION

Lack of personnel caused curtailment of dental health education activities rather than an extension of this service as planned. The principal medium used for reaching a large number of persons was the distribution of dental health literature. Special effort was made to bring to the attention of teachers, public health nurses, parents, and high school students a pamphlet entitled "Your Child's Teeth." This pamphlet is published by the American Dental Association and it is considered one of the best sources of dental health facts available at this time. For primary children, a new illustrated pamphlet was prepared by this Bureau and the Bureau of Health Education. Dental health information is given in rhyme. The idea is that in coloring the pictures and reading the lines, the important truths regarding dental care will be impressed upon the minds of the children. Whenever time permitted, the dental motion picture—in sound and color—"Billy's Trip to Health Land," was presented to elementary school children during a visit of the dental trailer clinic. In connection with corrective work done in the dental trailer clinic, emphasis on home dental care and correct toothbrushing technique was a continuous part of the program.

DENTAL CORRECTIONS

Operation of the dental trailer was continued and dental corrective service made available to indigents among the preschool and

school children through the elementary grades, indigent prenatal and postpartum cases, and to emergency cases. The eligibility of a patient was determined by a public health nurse, welfare worker, or local dentist. In order to help as many persons as possible, only the most immediate and necessary service was rendered to each case. The total number of persons receiving dental care through the facilities of the dental trailer clinic was larger than in 1942. Two factors account for this. First a dental hygienist worked with the Bureau for four months; second, a larger and better equipped trailer was acquired. The hygienist being available to chart the mouths of the patients and do prophylaxis, and record the services rendered left more time to the operating dentist for actual corrections. The roomier trailer-office allowed for more convenient arrangement of equipment and ease of performance—thus eliminating confusion. A helper or an assistant was employed in the fall who helps with the driving and unkeep of the trailer, as well as keeping records and assisting at the chair. The following summary indicates the services rendered in 1943 through the dental trailer clinic:

	Maternal	Preschool	School			Totals		
			White	Col.	Total	White	Col.	Total
Patients, new	34	80	1999	4	2003	2113	4	2117
Patients, old	10	12	716	2	718	738	2	740
Extractions	29	30	1508	2	1510	1567	2	1569
Fillings, all kinds	27	22	1545	0	1545	1594	0	1594
Treatments	21	128	686	0	686	835	0	835
Prophylaxis	12	40	658	0	658	710	0	710
Miscellaneous	1	-	231	0	231	232	0	232

Of the eight counties receiving dental trailer clinic service, one (Lafayette) was given special consideration and visited twice. For a little more than three years, the University of Florida through its Agricultural Experiment Station has been sponsoring a nutritional program in one of the rural schools of this county. The school selected showed that 97 per cent of the children had one or more nutritional deficiencies and the community ranked low in income. The program as carried on by the University of Florida consists in providing a low-cost, balanced school lunch to the children (grades one through ten), with special food, vitamin, and iron concentrates, and making medical care available for those children needing special attention. The Dried Milk Institute supplies milk for the experiment and each child's lunch must contain milk, either as a drink or in the food. The Bureau of Dental Health was asked to assist by giving dental corrective service and dental health education to the school. Another school with a similar group of children is used as a control. Because of the better diet, obvious improvement in both general and dental health has been shown. On the second visit, a great improvement in the home care of the children's teeth was noted.

Through the Children's Bureau, maternal and child health funds were provided for fourteen county health units for the purpose of conducting dental corrective programs for the indigent preschool children, primary children, and indigent prenatal and postpartum patients. However, because of the shortage of dentists, only twelve counties were able to participate. One of the twelve counties operated throughout the year, one for eleven months, one for nine, one for six, one for five, four for four months, one for two, and two for only two months. Also, the number of dentists participating was greatly reduced.. A county by county summary of the program is given below:

Counties and No. Dentists Participating		Maternal White	Preschool White	School White	Total	Treatments	Extractions	Fillings all kinds	Prophylaxis	Hours	Cost
Bay	4	4	2	175	181	00	218	52	00	54	$189.00
Gadsden	1	0	00	26	26	00	40	125	00	33	115.50
Hillsborough	1	22	78	17	117	60	82	54	4	84	294.00
Lake	4	3	00	164	167	6	109	224	29	68	238.00
Leon	1	43	00	2	45	22	7	77	3	41	143.50
Nassau	1	22	2	11	35	7	32	9	11	21	73.50
Orange	1	00	00	126	126	28	28	90	37	29½	103.25
*Okaloosa	1	00	00	33	33	00	40	132	4	52½	183.75
Pinellas	1	139	00	00	139	189	58	417	34	100	350.00
Seminole	1	20	5	149	174	21	85	50	150	56	196.00
Volusia	1	00	27	94	121	3	53	213	00	75	262.50
*Walton	1	00	4	27	31	11	15	36	8	11	38.50

*-Walton and Okaloosa form one county health unit.

Of the three corrective clinics operating in conjunction with county health units for the benefit of school children, Pinellas alone continued throughout the year uninterrupted. Hillsborough was without a clinic dentist for three months and in Dade County the year was in its fourth quarter before a permanent dentist was located. All three units are to be commended for the splendid service they have rendered.

OTHER ACTIVITIES

Winter and summer meetings of the district dental societies and the annual meeting of the Florida State Dental Society were attended by the director and the assistant director. Also, the Annual Mid-Winter meeting of the 5th Dental District, which was held in Atlanta. This meeting compares in scope and interest throughout the southern states to the Mid-Winter Clinic held in Chicago every February. The acting director appeared on the program of the meetings of Dental Health Personnel of the Southeastern States, held in Atlanta.

From time to time, conferences were held with the county health unit directors and public health nurses in regard to their Maternal and Child Health dental corrective programs, or arrangements made for visits by the dental trailer clinic. In each instance, the local dentists were contacted and their cooperation and approval of the dental programs obtained. Special visits were made to the dental clinics in Manatee, Hillsborough, and Okaloosa Counties. The clinics in Manatee and Okaloosa are independently operated.

The experimental dental clinic set up at Valparaiso in 1942, through the cooperation of the United States Public Health Service and the State Board of Health, continued to operate throughout the year with a change of dental officers by the United States Public Health Service in the early spring. Both old and new residents of the community are very grateful and appreciative of the service the clinic affords. This experimental clinic, although not considered a financial success, has been worthwhile in many ways and has surely answered a great war-time need.

One of the most important activities of this Bureau for 1943, was the inauguration of the Victory Corps-Physical Fitness Dental Program in the high schools of the state. The Victory Corps-Physical Fitness Dental Program, the first dental program for high school students ever to be presented on a national scale, is correlated with the correction of physical defect phases of the Victory Corps Physical Fitness programs in high schools throughout the nation. It is the result of the combined efforts of the American Dental Association, the United States Public Health Service, and the United States Office of Education to aid the all-out war goal by making dentally fit high school students who are near military age and who will, in all likelihood, be called into active service or into vital war industries upon graduation or shortly thereafter.

On the state level, the Florida State Dental Society, the State Board of Health (through the Bureau of Dental Health), and the State Department of Educaation gave active support to the movement. The dentists were urged both by letter and personal contact to participate by giving priority of appointment to high school students, especially to those in the upper grades. A recent survey on this phase indicated that the dentists had responded wholeheartedly and revealed that many of them had been carrying out the idea in actual practice before it was presented to them as an organized war effort. Each county school superintendent and high school principal was requested by the State Superintendent of Public Instruction to cooperate insofar as possible. Letters from this Bureau were sent to the county superintendents and high school principals explaining the movement and its main objective, together with samples of dental health literature available for distribution to teachers and high school students. Suggestions were given on ways and means of promoting the program. Also, each county health unit director in the state was contacted by letter and asked to give active support by supplying speakers and dental health literature to the schools.

CONCLUSION

There can be little increase in the Bureau's activities until additional personnel—dentists and/or dental hygienists—are obtained. In order that the director may spend some time at headquarters, it is planned to conduct the dental trailer clinic in two-week periods only, thus allowing him a week for office supervision and necessary travel over the state in interest of the program. Funds from the Children's Bureau will be requested as usual and an attempt made to keep as many of the Maternal and Child Health dental corrective programs operating as possible. Also, the distribution of dental health literature will be continued and new pamphlets prepared to fill various needs. Dental health films will be presented to schools and civic groups upon request if time will permit. Should a dental hygienist be secured, the educational phase of the program can be expanded through the medium of lectures and talks, presentation of dental health films, preparation of articles and booklets suitable for the different school ages. With the addition of a dentist to the staff, the dental trailer clinic would be able to visit more communities, and the time spent on clinic visits could be extended when necessary. An additional dentist could help the director in the organization of other dental corrective clinics over the state, as well as assist with the dental health education program in the schools and with community dental health education.

NARCOTICS

M. H. DOSS, Director

The Bureau of Narcotics is charged with the enforcement of (1) Uniform Narcotic Drug Act, (2) State Drug and Sign Act, (3) Medical Practice Act, (4) Physicians Registration Act, (5) guarding of the buildings and grounds of the State Board of Health at Jacksonville.

The personnel of the Bureau of Narcotics consists of five narcotic inspectors, three armed guards, one secretary, one office clerk and one police officer assigned to this office by the City of Jacksonville. Narcotic inspectors are stationed in the following cities with respective districts to work, Jacksonville, Tampa, Pensacola and Miami. Total number of paid employees are nine:

Total number of investigations	764
Total number of violations corrected where no legal action was taken	116
Total number of arrests	78
Total number of criminal prosecutions	75
Aggregate sentences imposed by the Courts, 56 years, 4 months, 1 day	
Aggregate fines imposed by the Courts	$ 643.08
Total number defendants receiving a deferred or suspended sentence	16
Total number defendants placed on probation by the Courts	5
Total number defendants (Narcotic Addicts) sentenced to Lexington Narcotic Farm	2
Total number criminal cases dismissed or nolle prosequi by the Courts	2
Total number of miles driven by four Inspectors	98,020

UNIFORM NARCOTIC DRUG ACT

Number of arrests	61
Aggregate sentences imposed by the Criminal Courts, 48 years, 4 months, 1 day	
Aggregate fines imposed by the Criminal Courts	$ 350.00
Number of persons receiving a jail or penitentiary sentence	23
Number defendants receiving a deferred, withheld or suspended sentence	14
Number defendants placed on probation by the Criminal Courts	4
Number criminal cases discharged or nolle prosequi by the Courts	4

MEDICAL PRACTICE ACT

Number of arrests	11
Aggregate sentences imposed by the Courts, 7 years, 9 months	
Aggregate fines imposed by the Courts	$ 293.08
Number of criminal cases pending in Criminal Courts	2
Number defendants receiving a deferred or suspended sentence	2
Number defendants placed on probation by the Courts	3
Number violations corrected where no legal action was taken	56

STATE DRUG AND SIGN ACT (Pharmacy)

Number of arrests and prosecutions	3
Aggregate sentences imposed by the Criminal Courts, 3 months	
Aggregate fines imposed by the Courts	$ 20.00
Number Pharmacists reported to State Board of Pharmacy for illegal and unprofessional acts	5
Number drug stores registered for fiscal year 1943-1944	732

PHYSICIANS REGISTRATION ACT

Number of Medical Doctors (M.D.) registered	2,134
Number of Osteopathic Physicians (D. O.) registered	445
Total number of practitioners of the healing arts registered according to State Law	2,579

The Physicians Registration Act, same being Chapter 12005, Laws of 1927, was not brought forward when the General Laws of Florida were revised by the Attorney General in 1941. Since such time the Naturopathic Physicians have amended their Act, requiring such practitioners to register on or before January 1st of each and every year. Chiropractic Physicians are not required to register. We are required to register and issue a Certificate to Chiropodists and Masseurs but are not authorized to accept the one dollar fee.

GUARD SERVICE

The Bureau of Narcotics is also charged with the guarding of the buildings of the State Board of Health at Jacksonville. Three armed, uniformed guards maintain a constant patrol of the building and grounds at all hours the offices are closed.

A register of all employees is kept at the guard house so that it is possible, through the guards, for anyone to locate an employee of the State Board of Health at any time of the night or when they are not in their respective offices. A register is also kept by the guards showing the date and time any employee enters and leaves the building during closed hours.

There are many services rendered physicians and the general public by these guards during hours the State Board of Health is closed. In addition to the above described duties, the Director of the Bureau of Narcotics, is serving as Acting Building Superintendent during the absencee of Mr. Whiddon, who is serving in the Armed Forces.

VITAL STATISTICS

EDWARD M. L'ENGLE, M.D., Director

As is customary, the detailed report of this Bureau will be published separately. This report, therefore, will be a summary and will contain mention of only a few of the more important matters with which the Bureau was concerned and will refer to certain trends which are apparent.

Requests for birth information and for the filing of delayed birth certificates decreased somewhat in number from the high point reached in the previous year. However, births, deaths, marriages, and divorces increased; births by 7,184 over the previous year; deaths by 1,914; marriages reached an all-time high of 53,912, an increase of 5,384 over the previous year; divorces increased 3,487, reaching a total of 16,046.

The birth rate was 25.1, the highest since 1927. The death rate was 12.7. The increase in the birth rate probably does not presage a permanent increase to the rate prevailing in 1927, but is the result of influences arising from the war and from the high decree of individual economic prosperity induced by the war. That there was no marked increase in the death rate, in spite of war conditions, is worth noting. There has even been a decrease in deaths from tuberculosis.

The legislature in 1943 passed an act permitting the various County Judges to issue delayed birth certificates. This act provided that no person could establish more than one certificate. This required a search of the files in every case. There have been received from the County Judges up to December 31, 1943, 2,879 certificates, of which 153 were found on file and 31 were certificates for persons born elsewhere than in Florida, making a total of 184 which were returned to the County Judges. While it should be understood that a birth certificate must record the name at birth, the act should be amended to make this plain. Certificates were received made out in the name of married women. This is not a correct practice and does not sufficiently identify the person whose certificate is sought to be filed. As long as it is considered desirable and important to distinguish between legitimacy and illegitimacy, there should be proof on such certificate that a person whose birth is recorded by a County Judge is rightfully the possessor of one certain name rather than another.

Searching the records for certificates presented by the County Judges involves a large amount of work. Clerks must be paid for this work. The act should be futher amended by adding 50c to the statutory fee, which should be paid to the Bureau of Vital Statistics to reimburse it for the expenses of the search.

No satisfactory substitute for a census count in estimating population has been devised. The Census Bureau has arrived at a method of estimating population by counting the number of ration cards issued by the various counties. This method is not suitable for use in determining rates of births and deaths, so that in spite of the changes of population brought about by the unusual amount of migration, we are still using the 1940 census of population as a means of estimating rates. These estimates should, however, be accepted with caution. Some counties have decreased in population; others have increased. It is probable that the State as a whole has slightly increased but nothing less than a complete census will give figures that are accurate enough to use.

Shortages of materials and personnel caused hardships and inconveniences which are to be expected in war time. The office force has adopted the attitude of good soldiers who are cheerfully doing their part.

TUBERCULOSIS

E. J. TEAGARDEN, M.D., Director

Dr. Lynne E. Baker, former director of the Division of Tuberculosis, resigned on June 15, 1943, to enter private practice in Dayton, Ohio. He was succeeded on September 1, 1943, by Dr. E. J. Teagarden of Decatur, Alabama.

On July 1, 1943, Mrs. J. W. Morehouse was appointed assistant to Mr. J. W. Morehouse, x-ray technician. This addition has resulted in smoother and more efficient operation of the Mobile X-ray Unit by relieving Mr. Morehouse of many routine duties, and permitting him to concentrate more exclusively on the actual making of miniature x-rays.

During 1943, the Mobile X-ray Unit completed surveys in forty-six counties, making a total of 42,159 miniature films, of which 98.7 percent were technically satisfactory. In two percent of the satisfactory films there was some reason to suspect pulmonary tuberculosis, and in 1.2 percent some other pathology was noted. Among the non-tuberculous chest conditions were enlarged heart or aorta; healed pleurisy; scoliosis; various rib deformities; unresolved pneumonia; bronchiectasis; tumor; dextrocardia; situs inversus; and various foreign objects, principally bullets and birdshot. Some of these conditions are of little or no importance to the individual. On the other hand, demonstration by means of the miniature film not infrequently leads to diagnosis and treatment of a serious condition. Thus, the recognition of non-tuberculous chest conditions is a valuable by-product of the tuberculosis control program.

The table appended summarizes the survey by counties.

It is too early to gauge the effectiveness of the follow-up of cases of suspected tuberculosis revealed by the survey. As usual, some counties cover the field promptly and effectively, while others are inclined to be dilatory. Concession must be made to the pressure of work and to diminished personnel. Nevertheless, every possible effort should be put into the follow-up, since otherwise the survey has little actual value.

A first-class source of new cases of tuberculosis has been the Selective Service System. Approximately 1,500 cases were reported to us in 1943 from State Selective Service Headquarters, St. Augustine, and from the Induction Center at Camp Blanding. Not all of these are active cases requiring treatment, and many had been previously reported through other channels. At least one-third, however, would appear to be newly discovered cases of tuberculosis. By means of a series of conferences with the authorities at State Selective Service Headquarters and at Camp Blanding, a system has been devised whereby the chest films of tuberculous rejectees are routed from Camp Blanding through this office before going to St. Augustine for filing. Here they are reviewed promptly, and appropriate recommendations are made to the local authorities in each case. Judged from the short time it has been in operation, this system promises to be effective in ensuring proper care for these young men.

Under the auspices of the General Extension Division of the University of Florida, in cooperation with the Florida Tuberculosis and Health Association, a short course on Tuberculosis was held on the campus at Gainesville. This was well attended by tuberculosis workers and others interested in the control and elimination of the disease. Numerous institutes on tuberculosis were held in various counties throughout the State. The annual conference on tuberculosis for health officers and public health nurses was again omitted because of war conditions.

The tuberculosis death rate for 1943 promises to reach a new low figure, judging from preliminary reports. This testifies to continued interest and effort of all persons and agencies engaged in tuberculosis work, in spite of adverse conditions.

A pressing need in Florida is for more tuberculosis beds in modern, well-equipped sanatoria. We must provide not only treatment for the early case, but isolation and care for the far advanced hopeless case. Only by so doing will we dry up the sources of infection and prevent the further spread of this disease.

The director of the Division of Tuberculosis gratefully acknowledges the part played in the tuberculosis control program by the Tuberculosis and Health Committee of the Florida Medical Association, the State Tuberculosis Sanatorium, the Florida Tuberculosis and Health Association, and other official and volunteer agencies, as well as the private physicians throughout the State.

TABLE 1.—SUMMARY OF MINIATURE FILMS TAKEN BY MOBILE X-RAY UNIT—1943.

County	Number films taken	Number films satisfactory	Percent films satisfactory	Number films interpreted negative	Number films suspicious of tuberculosis	Percent films suspicious of tuberculosis	Number films showing other pathology
State	42,159	41,617	98.7	40,266	853	2.0	497
Alachua*	3,061	3,043	99.4	2,953	54	1.8	36
Bay	1,707	1,683	98.6	1,652	23	1.4	8
Bradford	440	439	99.7	430	5	1.1	4
Brevard	258	254	98.4	208	17	6.7	29
Broward	984	971	98.7	901	37	3.8	33
Calhoun	354	350	98.9	338	10	2.9	2
Charlotte	312	312	100.0	301	7	2.2	4
Clay	209	209	100.0	204	2	1.0	3
Collier	167	167	100.0	164	2	1.2	1
Dade	1,623	1,604	98.8	1,517	48	3.0	39
DeSoto	941	909	96.6	878	16	1.8	15
Duval	1,067	1,062	99.5	1,016	30	2.8	16
Flagler	122	121	99.2	94	9	7.4	18
Franklin	678	676	99.7	657	17	2.5	2
Gadsden	1,385	1,364	98.5	1,323	31	2.3	10
Glades	81	77	95.0	73	2	2.6	2
Gulf	537	531	98.9	520	9	1.7	2
Hendry	509	496	97.4	475	10	2.0	11
Highlands	782	750	95.9	728	9	1.2	13
Hillsborough	1,042	1,040	99.8	997	37	3.5	6
Indian River	336	331	98.5	267	38	11.5	26
Jackson	1,582	1,553	98.2	1,518	28	2.3	7
Jefferson	455	451	99.1	442	7	1.6	2
Lake	1,823	1,800	98.7	1,760	25	1.4	15
Lee	1,539	1,529	98.7	1,489	29	1.9	11

TABLE 1.—SUMMARY OF MINIATURE FILMS TAKEN BY MOBILE X-RAY UNIT—1943.—(Continued)

County	Number films taken	Number films satisfactory	Percent films satisfactory	Number films interpreted negative	Number films suspicious of tuberculosis	Percent films suspicious of tuberculosis	Number films showing other pathology
Leon	1,058	1,048	99.1	1,011	31	3.0	6
Fla. A. & M. College	719	713	99.2	697	9	1.3	7
Fla. State College for Women	1,125	1,117	99.3	1,090	15	1.3	12
Levy*	861	847	98.4	819	13	1.7	15
Madison	2,452	2,407	98.2	2,355	32	1.3	20
Marion	259	257	99.2	252	2	0.8	3
Fla. Indust. School for Girls	120	119	99.2	118	1	0.8	0
Fla. State Bd. H. Hospital No. 2	97	97	100.0	95	1	1.0	1
Monroe	325	323	99.3	313	7	2.2	3
Okaloosa	711	695	97.7	678	13	1.9	4
Okeechobee	73	72	98.6	62	7	9.7	3
Orange	1,575	1,559	99.0	1,529	20	1.3	10
Pinellas*	2,238	2,218	99.1	2,153	48	2.6	17
Polk	1,757	1,740	99.0	1,696	29	1.7	15
Putnam	524	519	99.0	505	4	0.8	10
Santa Rosa	746	725	97.2	716	6	0.9	3
Sarasota	338	337	99.7	321	15	4.5	1
Seminole	358	355	99.2	347	2	0.6	6
St. Johns (Fla. Normal & Indus. Institute)	344	339	98.5	330	8	2.4	1
St. Lucie	370	352	95.1	301	27	7.7	24
Taylor	1,226	1,212	98.8	1,189	20	1.7	3
Volusia	1,041	1,018	96.8	1,006	7	0.7	5
Bethune-Cookman College	326	325	99.7	319	5	1.8	1
Wakulla	433	427	98.6	411	13	3.0	3
Fla. State Bd. H. Hospital No. 1	41	41	100.0	39	2	5.0	0
Walton	931	916	98.4	896	11	1.2	9
Washington	117	116	99.1	113	3	2.6	0

*Two surveys.

LOCAL HEALTH SERVICE

W. T. SOWDER, M.D., Acting Director

On January 1, 1943, there were thirty-four, or 50.7 per cent, of the sixty-seven counties in Florida operating under the County Health Unit System. This represents 58.6 per cent of the population of the State.

The budgets for county health units amounted to $833,026, which included $425,740 State and Federal funds and $407,286 contributed by local agencies. Local agencies appropriated approximately .099 per cent of the assessed valuation of the counties having organized health units for the support of the units.

Work of the county health units has been greatly increased because of various and extensive war activities throughout the State. Special effort has been made to carry on a generalized program in the counties, but in some of the units due to the shortage of sanitation personnel it was necessary to restrict the program to meet emergency demands in many instances. There are relatively few counties in which there are no military establishments, and these are so closely connected with neighboring counties, which do have military camps, that they, too, have had a more or less corresponding responsibility.

The Polk County Health Unit was opened January 1, 1943, but has been without a health officer since October 31, 1943, because of the transfer of the U. S. Public Health Service officer temporarily attached to this county. A limited program, including sanitation, tuberculosis, public health nursing, and venereal disease control is being carried on until a permanent health officer is secured.

Gilchrist County discontinued its appropriation, and this unit was closed on February 28, 1943.

At the close of the year there were on duty in local health units the following full time personnel: 24 health officers, 69 sanitary officers, 130 public health and clinic nurses, and 324 other health workers.

Dr. Elton S. Osborne, Jr., formerly Assistant Director of the Bureau of Local Health Service, left February 14, 1943, to report for duty with the U. S. Public Health Service. This left the position vacant.

Dr. A. W. Newitt resigned as Director of the Bureau of Local Health Service on April 30, 1943, to report for duty with the U. S. Public Health Service and was assigned to tuberculosis control.

On June 7, 1943, Wilson T. Sowder, Surgeon U. S. Public Health Service, was transferred from the Division of Venereal Disease Control to become Acting Director of this Bureau.

Mr. S. D. Macready was appointed Sanitation Consultant in this Bureau of the State Board of Health on May 1, 1943, but left on June 30, 1943, to resume work with the United Fruit Company. He was succeeded on July 1, 1943, by Mr. B. G. Barfield who was formerly sanitarian in Orange County.

On July 15th a senior stenographer was added to the department which now consisted of a Director, Sanitation Consultant, Clerical Consultant, Secretary and a senior Stenographer.

Special effort is being made to establish more uniform records and filing in the county health units. To this end the services of the Clerical Consultant are made available to the county health officers. A record committee was appointed for the purpose of discontinuing unnecessary records and to simplify records and reports.

A compilation of health department activities in organized units is attached hereto; also a tabulation of the funds budgeted in each of these units.

TABLE 1.—SUMMARY OF COUNTY HEALTH UNIT BUDGETS, 1943-1944.

County	Total Budgeted	SOURCE OF FUNDS							
		State	County	U.S.P.H.S.		State Venereal Disease	Children's Bureau	Other Agencies	
				Title VI	Venereal Disease			Name	Amount
Baker	10,840	4,470	4,450	1,620	100		200		
Bay	27,390	6,420	10,500	4,080	2,330	1,380	2,680		
Broward	26,460	7,420	10,500	2,340	2,580	1,020	2,600		
Clay-Bradford	15,950	4,500	5,620	1,800	1,690		2,340		
Dade	207,480	17,400	144,680	15,600	20,080		9,720		
Duval	37,900	11,100	17,200	4,800	500		4,300		
Escambia	45,946	8,900	5,010	2,100	8,475	1,200	6,500	Pensacola	13,761
Franklin-Gulf-Wakulla	21,220	4,080	8,800	1,800	3,940		2,600		
Gadsden	22,400	5,940	6,900	1,920	4,430	840	2,220	Quincy	150
Highlands-Glades	12,920	2,500	4,800	1,620	1,500		2,500		
Hillsborough	36,690	10,240	14,000	7,740	1,130		3,580		
Jackson	19,720	4,700	6,560	2,400	3,210		2,850		
Jefferson	10,670	4,520	4,200		1,800		150		
Lake	24,310	4,200	10,060	3,420	2,850	1,380	2,400		
Leon	27,760	7,660	4,420	3,000	4,615	1,200	2,800	Tallahassee	4,065
Levy	15,560	4,500	4,500	2,640	2,340	1,380	200		
Madison	10,800	1,600	6,000		2,900		300		
Monroe	13,320	3,200	7,800		2,220		100		
Nassau	17,630	4,660	5,100	2,880	2,900		2,090		
Okaloosa (Oct. 1, 1943-June 30, 1944)	7,542.50	2,292.50	2,880	1,350	200		400	Co. Direct	420
Orange	35,880	8,700	14,340	5,100	3,220	1,200	3,320		
Pinellas	50,870	9,280	25,480	3,180	7,950	1,380	3,600		
Polk	32,650	2,400	22,410	1,800	2,700	840	2,500		
Santa Rosa	8,325	1,700	2,600	2,000	2,025				
Seminole	16,520	4,400	7,400	1,500	2,720		500		
Taylor	12,610	3,080	4,500	1,380	3,500		150		
Volusia	47,900	11,220	21,960	1,620	7,760	1,320	4,020		
Walton (Oct. 1, 1943-June 30, 1944)	7,447.50	2,397.50	3,000		1,550		500		
Washington	8,315	1,500	3,220	1,620	1,875		100		

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943.

ACTIVITIES		Baker	Bay	Bradford	Broward	Clay	Dade	Duval	Escambia	Franklin-Gulf	Gadsden	Highlands-Glades	Hendry	Hillsborough
COMMUNICABLE DISEASE CONTROL														
Admissions to service	A1	5	40	31	61	94	1,648	19	190	12	12	7	0	26
Consultations with physicians	A2	2	3	24	20	17	79	15	106	7	12	10	0	18
Field visits	A3-9	13	79	34	179	135	2,689	140	698	20	30	44	0	407
Smallpox immunizations	A15	12	1,850	325	640	217	7,307	876	2,531	250	481	534	20	1,838
Diphtheria immunizations	A16-18	109	1,921	411	726	187	2,534	656	2,126	249	653	252	3	1,131
Typhoid Fever immunizations	A19	6	2,625	594	405	555	264	540	9,176	1,230	725	433	16	1,998
VENEREAL DISEASE CONTROL														
Admissions to medical service	B1	194	1,437	317	1,448	169	5,018	6,457	1,400	663	436	707	47	3,263
Clinic visits	B3	3,954	24,111	6,848	20,918	5,576	117,201	125,250	20,048	14,416	11,458	14,979	3,562	72,373
Field visits	B4	178	2,602	809	2,056	243	11,009	2,879	2,318	2,093	661	673	0	3,179
TUBERCULOSIS CONTROL														
Individuals admitted to medical service	C1	18	21	18	350	16	2,181	501	122	1	66	18	0	0
Individuals admitted to nursing service	C2	29	159	32	356	42	1,061	30	140	53	117	49	0	78
Clinic visits	C5	34	3	14	302	118	4,223	580	324	1	112	9	0	5
Nursing visits	C7-8	64	615	72	744	100	3,057	158	341	136	1,917	58	1	447
MATERNITY SERVICE														
Cases admitted to medical service	D1-8	120	167	91	299	72	648	279	667	94	593	46	10	160
Cases admitted to nursing service	D2-7-10	150	412	150	401	121	2,909	378	1,123	188	836	67	15	378
Visits by antepartum cases to medical conferences	D3	191	280	115	591	96	1,519	457	1,477	162	851	90	26	436
Nursing visits	D 5-6-11-12	473	953	490	1,036	378	6,622	1,586	1,990	431	3,274	151	31	1,438
INFANT HYGIENE														
Individuals admitted to medical service	E1	25	43	100	189	70	268	253	327	48	247	10	0	158
Individuals admitted to nursing service	E2	189	286	129	277	70	1,222	438	724	144	711	35	2	248
Visits to medical conferences	E3	54	77	206	345	74	431	709	653	70	443	13	0	400
Nursing visits	E5-6	348	667	358	587	222	5,553	1,863	1,767	267	2,302	60	4	1,350
PRESCHOOL HYGIENE														
Individuals admitted to medical service	E8	26	156	38	141	42	380	393	390	103	325	28	0	589
Individuals admitted to nursing service	E9	289	676	48	123	42	543	1,341	230	218	1,142	69	0	207
Visits to medical conferences	E10	70	201	56	217	51	448	944	431	181	591	29	0	1,437
Nursing visits	E12-13	530	1,356	176	266	98	4,229	3,552	2,073	467	2,731	85	0	2,055
Inspections by dentists or dental hygienists	E14	0	0	0	0	0	0	0	0	0	0	0	0	55

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943—(Continued)

ACTIVITIES		Jackson	Jefferson	Lake	Leon	Levy	Madison	Monroe	Nassau	Okaloosa	Orange	Pinellas	Polk	Santa Rosa
COMMUNICABLE DISEASE CONTROL														
Admissions to service	A1	8	63	73	23	36	12	21	118	27	975	60	16	17
Consultations with physicians	A2	8	118	0	24	1	5	7	32	11	345	10	3	24
Field visits	A3-9	14	80	137	63	41	38	29	139	95	1,420	188	52	61
Smallpox immunizations	A15	485	427	5	844	0	135	142	310	1,198	3,659	1,872	922	73
Diphtheria immunizations	A16-18	622	241	3	785	212	209	256	748	1,250	4,250	790	1,552	338
Typhoid Fever immunizations	A19	2,461	1,492	0	3,763	787	1,822	970	1,366	1,422	6,591	375	226	2,096
VENEREAL DISEASE CONTROL														
Admissions to medical service	B1	692	540	973	2,401	412	664	557	662	343	1,903	852	1,079	72
Clinic visits	B3	14,540	16,832	24,264	28,882	15,836	13,427	7,031	9,814	7,646	49,806	28,018	20,139	1,486
Field visits	B4	2,689	467	1,826	5,648	111	207	842	1,066	879	6,702	1,817	3,752	68
TUBERCULOSIS CONTROL														
Individuals admitted to medical service	C1	77	36	8	130	218	70	51	58	6	399	245	0	0
Individuals admitted to nursing service	C2	88	37	237	189	222	24	111	102	31	399	438	801	9
Clinic visits	C5	113	61	2	91	2	123	58	88	8	388	644	1	0
Nursing visits	C7-8	215	149	452	653	6	93	598	420	60	843	1,020	2,632	48
MATERNITY SERVICE														
Cases admitted to medical service	D1-8	277	219	56	395	31	51	94	172	35	330	379	1	1
Cases admitted to nursing service	D2-7-10	379	237	222	581	44	50	139	184	135	309	485	67	77
Visits by antepartum cases to medical conferences	D3	262	178	126	1,545	117	114	181	343	60	815	1,480	1	1
Nursing visits	D5-6-11-12	916	678	544	2,048	141	146	500	427	584	469	907	137	168
INFANT HYGIENE														
Individuals admitted to medical service	E1	168	87	3	89	8	50	29	171	44	269	374	1	9
Individuals admitted to nursing service	E2	236	197	202	390	22	20	101	144	106	293	652	44	52
Visits to medical conferences	E3	217	145	4	174	23	103	37	327	67	783	961	1	9
Nursing visits	E5-6	546	757	490	889	91	47	269	434	365	396	2,061	96	137
PRESCHOOL HYGIENE														
Individuals admitted to medical service	E8	88	55	40	140	13	30	33	486	87	712	669	45	2
Individuals admitted to nursing service	E9	146	147	399	722	8	9	98	289	108	709	1,112	80	27
Visits to medical conferences	E10	121	107	49	280	24	41	47	1,155	109	1,858	1,156	45	2
Nursing visits	E12-13	356	595	674	1,666	34	24	283	760	344	859	1,946	186	47
Inspections by dentists or dental hygienists	E14	0	6	0	0	0	2	0	0	0	0	46	109	0

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943—(Continued)

ACTIVITIES	Seminole	Taylor	Volusia	Wakulla	Walton	Washington	TOTALS THIS YEAR
COMMUNICABLE DISEASE CONTROL							
Admissions to service A1	6	14	101	56	1	2	3,774
Consultations with physicians A2	11	0	9	0	0	1	922
Field visits A3-9	69	50	432	79	3	9	7,467
Smallpox immunizations A15	1,006	23	1,658	137	315	28	30,120
Diphtheria immunizations A16-18	833	90	727	173	674	522	25,233
Typhoid Fever immunizations A19	2,033	934	1,419	449	644	1,625	49,042
VENEREAL DISEASE CONTROL							
Admissions to medical service B1	1,102	174	1,503	232	230	159	36,106
Clinic visits B3	24,522	2,273	24,083	4,256	5,895	6,136	745,580
Field visits B4	614	894	3,279	254	1,013	1,116	61,944
TUBERCULOSIS CONTROL							
Individuals admitted to medical service C1	71	28	336	1	8	2	5,056
Individuals admitted to nursing service C2	71	126	336	21	8	16	5,412
Clinic visits C5	107	1,314	16	2	18	6	8,767
Nursing visits C7-8	319	477	1,034	49	36	48	16,862
MATERNITY SERVICE							
Cases admitted to medical service D1-8	170	70	204	84	18	10	5,843
Cases admitted to nursing service D2-7-10	316	260	607	186	11	44	11,461
Visits by antepartum cases to medical conferences D3	277	118	270	142	55	10	12,386
Nursing visits D5-6-11-12	1,277	793	1,852	419	57	133	31,049
INFANT HYGIENE							
Individuals admitted to medical service E1	93	31	104	50	8	47	3,373
Individuals admitted to nursing service E2	233	177	483	148	12	37	8,024
Visits to medical conferences E3	117	34	254	87	41	87	6,946
Nursing visits E5-6	997	544	1,525	337	31	71	25,431
PRESCHOOL HYGIENE							
Individuals admitted to medical service E8	84	46	276	29	47	5	5,498
Individuals admitted to nursing service E9	135	486	743	185	21	28	10,380
Visits to medical conferences E10	105	93	492	42	54	10	10,446
Nursing visits E12-13	665	991	1,817	304	74	60	29,303
Inspections by dentists or dental hygienists E14	39	0	47	0	0	0	304

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943—(Continued)

ACTIVITIES	Baker	Bay	Bradford	Broward	Clay	Dade	Duval	Escambia	Franklin-Gulf	Gadsden	Highlands-Glades	Hendry	Hillsborough
SCHOOL HYGIENE													
Inspections by physicians or nurses F1	6	5,080	134	3,997	1,124	138,918	10,280	5,960	934	721	73	0	8,567
Examinations by physicians F2	357	1,701	20	692	7	5,767	1,503	56	610	173	0	0	3,074
Individuals admitted to nursing service F4	42	153	36	3,703	16	3,496	191	267	123	152	31	0	104
Nursing visits F5-6	122	465	80	4,456	83	39,933	1,846	1,560	381	567	72	0	1,591
Inspections by dentists or dental hygienists F7	1	24	0	201	0	1,036	189	0	0	31	0	0	1,376
ADULT HYGIENE													
Medical examinations G1-5	195	413	741	486	354	0	967	225	0	303	225	12	0
MORBIDITY SERVICE													
Medical visits H3-4	137	3	116	166	48	0	5	1,486	16	159	12	0	10
Nursing visits H5-6	71	18	123	120	239	354	114	509	75	313	11	0	745
Admissions to hospitals H7	0	0	0	0	4	0	1	271	0	16	0	0	0
GENERAL SANITATION													
Approved individual water supplies installed J1	2	12	0	2	23	10	0	32	3	13	0	0	12
Approved excreta disposal systems installed J2-3	24	491	2	303	110	869	442	244	70	51	138	0	282
Field visits J4-11	1,001	4,918	412	2,058	458	27,737	1,848	4,964	382	1,564	239	2	3,027
PROTECTION OF FOOD AND MILK													
Food-handling establishments registered for supervision K1	34	101	50	293	86	3,401	108	144	59	126	57	0	65
Field visits to food-handling estabs. K2	317	360	615	1,752	665	21,294	272	2,540	510	561	360	8	231
Dairy farms registered for supervision K3	2	20	6	35	6	74	0	92	5	8	19	0	0
Field visits to dairy farms K4	40	252	22	269	14	1,708	14	933	8	128	96	1	11
Milk plants registered for supervision K5	0	5	3	3	5	55	0	11	1	1	8	0	1
Field visits to milk plants K6	0	114	11	92	12	3,221	0	302	0	15	13	0	1
LABORATORY													
Specimens examined L1-21	2,865	10,057	4,783	5,117	3,661	161,906	4,791	10,497	3,970	5,756	4,614	601	1,986

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943—(Continued)

ACTIVITIES		Jackson	Jefferson	Lake	Leon	Levy	Madison	Monroe	Nassau	Okaloosa	Orange	Pinellas	Polk	Santa Rosa
SCHOOL HYGIENE														
Inspections by physicians or nurses	F1	907	567	2,120	490	1,577	711	2,059	4,305	364	6,403	6,235	31	1,250
Examinations by physicians	F2	29	602	585	0	507	260	630	768	187	2,880	1,208	0	379
Individuals admitted to nursing service	F4	39	4	521	17	26	31	335	590	102	511	948	31	42
Nursing visits	F5-6	105	18	727	137	119	194	1,834	945	305	4,221	1,787	127	96
Inspections by dentists or dental hygienists	F7	0	4	155	40	0	191	272	2	46	121	6,795	428	0
ADULT HYGIENE														
Medical examinations	G1-5	200	391	0	1,049	32	184	1,075	201	68	198	664	0	33
MORBIDITY SERVICE														
Medical visits	H3-4	469	423	0	0	820	267	340	524	103	444	88	0	0
Nursing visits	H5-6	755	23	303	43	488	269	8	127	326	1,108	413	3	4
Admissions to hospitals	H7	0	0	1	12	0	28	0	3	2	18	3	0	0
GENERAL SANITATION														
Approved individual water supplies installed	J1	4	0	9	4	7	0	0	0	10	2	15	4	13
Approved excreta disposal systems installed	J2-3	14	56	128	89	18	23	288	6	333	388	201	176	198
Field visits	J4-11	1,599	2,901	3,384	10,968	446	335	895	972	1,238	4,673	833	2,235	2,354
PROTECTION OF FOOD AND MILK														
Food-handling establishments registered for supervision	K1	25	26	144	112	15	75	175	50	14	61	182	442	18
Field visits to food-handling establishments	K2	182	80	1,750	2,432	202	300	926	201	248	137	1,068	1,027	292
Dairy farms registered for supervision	K3	8	4	9	52	1	6	2	3	8	0	7	5	13
Field visits to dairy farms	K4	82	8	169	316	1	24	8	14	16	0	24	5	99
Milk plants registered for supervision	K5	2	4	1	7	0	0	2	2	0	0	2	3	1
Field visits to milk plants	K6	10	10	52	78	0	23	16	8	0	0	7	3	7
LABORATORY														
Specimens examined	L1-21	4,903	3,340	8,051	10,224	2,929	7,160	5,602	4,538	3,237	8,111	9,836	1,005	944

TABLE 2.—TABULATION OF ACTIVITIES—STATE OF FLORIDA—1943—(Continued)

ACTIVITIES		Seminole	Taylor	Volusia	Wakulla	Walton	Washington	TOTALS THIS YEAR
SCHOOL HYGIENE								
Inspections by physicians or nurses	F1	2,025	1,344	9,596	829	0	338	216,945
Examinations by physicians	F2	1,054	1,305	2,358	366	220	80	27,378
Individuals admitted to nursing service	F4	571	91	304	36	17	47	12,577
Nursing visits	F5-6	1,744	238	1,554	128	94	209	65,738
Inspections by dentists or dental hygienists	F7	171	286	774	108	71	0	12,322
ADULT HYGIENE								
Medical examinations	G1-5	121	202	454	87	186	4	9,070
MORBIDITY SERVICE								
Medical visits	H3-4	19	307	6	7	56	252	6,283
Nursing visits	H5-6	2	39	478	93	14	901	8,089
Admissions to hospitals	H7	1	0	0	0	0	1	361
GENERAL SANITATION								
Approved individual water supplies installed	J1	3	3	9	1	0	0	193
Approved excreta disposal systems installed	J2-3	82	87	36	33	8	16	5,206
Field visits	J4-11	915	2,064	4,047	664	134	933	90,200
PROTECTION OF FOOD AND MILK								
Food-handling establishments registered for supervision	K1	39	35	429	45	35	53	6,499
Field visits to food-handling estabs.	K2	423	444	2,691	544	56	173	42,661
Dairy farms registered for supervision	K3	11	2	34	1	0	11	444
Field visits to dairy farms	K4	69	49	362	9	13	96	4,860
Milk plants registered for supervision	K5	11	2	8	0	0	0	138
Field visits to milk plants	K6	44	49	160	2	0	6	4,256
LABORATORY								
Specimens examined	L1-21	3,792	2,467	6,639	1,787	2,290	2,511	309,970

FINANCE AND ACCOUNTING

G. WILSON BALTZELL, Director

The amounts listed below represent appropriations and funds available for health services in the State of Florida for the fiscal year beginning July 1, 1942, and ending June 30, 1943.

LEGISLATIVE APPROPRIATIONS:

Salaries	$ 113,850.00	
Necessary and Regular Expenses	133,650.00	
For Prevention of Venereal Diseases	50,000.00	
County Health Units	150,000.00	
TOTAL		$ 447,500.00

CONTINUING APPROPRIATIONS:

Special Fees

Centralization of Marriage and Divorce Records	$ 40,319.00	
Registration of Doctors, Midwives, etc.	2,591.00	
Birth and Death Certificates	44,518.00	
Drug Store Inspections	7,420.95	
TOTAL		$ 94,848.95

FEDERAL FUNDS:

U. S. Public Health Service—Title VI Social Security Act	$ 185,229.39	
U. S. Public Health Service—Venereal Disease Control	303,604.29	
Children's Bureau—Maternal and Child Health	132,144.27	
Federal Works Agency—Quarantine Hospital	396,157.00	
TOTAL		$1,017,134.95

ROCKEFELLER FOUNDATION:

Division of Malaria Research	$ 12,132.56	
Cooperative Malaria Project	1,350.70	
Malaria Control—Escambia County	3,262.16	
TOTAL		$ 16,745.42
City of Pensacola		$ 500.00
Crippled Children's Commission		500.00
Counties, Cities, & School Boards: for Local Health and V.D. Units		519,825.00
Insulin—Special Appropriation. Authorized to be spent by Budget Commission		2,500.00
TOTAL		$2,099,554.32

All financial reports are in accordance with the fiscal year of the State of Florida and the Federal Government and not the calendar year.

The following figures reflect the increase in activities of the State Board of Health since last fiscal year:

Total Funds Available, 1942-1943	$2,099,554.32	
Total Funds Available, 1941-1942	1,313,392.05	
INCREASE		$ 786,162.27

Table 1 shows Recapitulation of all Disbursements by Funds; Table 2, Recapitulation of Salaries by Departments and Funds, and Table 3, Recapitulation of Necessary and Regular Expenses by Departments and Funds. A detailed financial report covering every department and division of the Florida State Board of Health and affiliated activities including each county health unit and venereal disease control program is on file in the office of Finance and Accounts.

TABLE 1.—RECAPITULATION OF DISBURSEMENTS BY FUNDS

	State	Local	U. S. P. H. S. Title VI	U. S. P. H. S. Venereal Disease	State Venereal Disease	Children's Bureau	Other Agencies	Total
Salaries	$105,860.29		$ 99,518.75	$ 45,635.40	$ 8,315.54	$28,208.95	$134,214.76	$ 421,753.69
Necessary and Reg. Expenses	132,582.50		34,336.75	121,765.94	8,215.98	18,060.01	143,438.68	458,399.86
	238,442.70		133,855.50	167,401.34	16,531.52	46,268.96	277,653.44	880,153.55
Local Health Projects	157,295.99*	309,032.43	43,034.60	136,202.01	37,774.11	51,592.70		734,931.84
	395,738.78	309,032.43	176,890.10	303,603.35	54,305.63	97,861.66	277,653.44	1,615,085.39
Warrant No. 3941 dated July, 1942, cancelled and restored to General Revenue in October, 1942					—76.00			—76.00
	$395,738.78	$309,032.43	$176,890.10	$303,603.35	$54,229.63	$97,861.66	$277,653.44	$1,615,009.39

*This figure represents amounts disbursed from State Funds deposited in individual Health Unit accounts with State Treasurer from Current Commitments and balance brought forward from previous years.

TABLE 2.—RECAPITULATION OF SALARIES BY DEPARTMENTS AND FUNDS

Department	State	U. S. P. H. S. Title VI	U. S. P. H. S. Venereal Disease	State V. D.	Children's Bureau	Other Agencies Name	Other Agencies Amount	Total
Administration	$ 12,507.24	$ 6,438.25	$ 1,111.07	$1,130.00	$ 2,294.00		$	$ 23,480.56
Laboratories	46,159.77	27,589.89	25,403.95	3,446.00				102,599.61
Vital Statistics	4,300.00	3,290.00			1,737.10	Special Fees	64,458.98	73,786.08
Sanitary Engs.	9,285.84	18,219.98						27,505.82
Finance and Accounts	9,788.87	3,830.26	2,301.91	1,102.00	2,072.55			19,095.59
Epidemiology	416.66	7,153.81						7,570.47
Local Health Service	6,373.33	2,625.00		1,332.33	1,620.00			11,950.66
Health Education	4,795.33	1,415.36	4,066.66	625.21	1,710.00			12,612.56
Narcotics	4,173.26	3,702.58				Special Fees	9,900.00	17,775.84
Public Health Nursing	3,200.00	4,714.28	3,799.86		8,936.02			20,650.16
Maternal and Child Health					6,325.95			6,325.95
Tuberculosis		8,640.00						8,640.00
Dental Health	1,500.00	4,342.50			2,680.00			8,522.50
Venereal Disease Control			8,951.95	680.00		Q. H. F.—U. S.	47,306.49	56,938.44
Merit System		2,247.19			833.33	C. C. C.	333.32	3,413.84
Cooperative Malaria Project	3,359.99	5,309.65				R. F. S. B. of H.	1,000.00	9,669.64
Malaria Control—Escambia County						M. C.—Escambia	1,935.00	1,935.00
Division of Malaria Research, R. F.						M. R.—R. F.	9,280.97	9,280.97
	$105,860.29	$99,518.75	$45,635.40	$8,315.54	$28,208.95		$134,214.76	$421,753.69

TABLE 3.—RECAPITULATION OF NECESSARY AND REGULAR EXPENSES BY DEPARTMENTS AND FUNDS

		U. S. P. H. S.				Other Agencies		
Department	State	Title VI	Venereal Disease	State V. D.	Children's Bureau	Name	Amount	Total
Administration	$ 3,276.97	$ 5,445.02						$ 8,721.99
Laboratories	1,540.28		450.74					1,991.02
Vital Statistics	20,291.28					Special Fees	23,925.96	44,217.24
Sanitary Engineers	10,695.78	619.68						11,315.46
Finance and Accounts	104.86							104.86
Epidemiology	1,540.27	316.25						1,856.52
Local Health Service	3,194.29							3,194.29
Health Education	608.19		509.21		315.61			1,433.01
Narcotics	6,710.76					Special Fees	1,705.35	8,416.11
Maternal and Child Health					1,550.01			1,550.01
Public Health Nursing	2,859.98				2,496.37			5,356.35
Tuberculosis	4,020.65							4,020.65
Dental Health					1,934.30			1,934.30
Venereal Disease Control			39,153.10	1,610.20		Q. H. F. U. S.	115,128.13	155,891.43
Merit System	878.57	160.50				C. C. C.	66.15	1,105.22
Cooperative Malaria Project	2,836.35	5,012.44				R. F.	277.23	8,126.02
Division of Malaria Research—R. F.						M. R.-R. F.	2,335.86	2,335.86
Training—V. D.			225.75					225.75
Training—In Service Field Orientation			1,179.01					1,179.01
Training—M. C. H.					3,498.63			3,498.63
Emergency Maternal & Child Care					444.20			444.20
Other Expenses	74,024.27	20,399.58	66,290.45	6,605.78	7,820.89			175,140.97
Unliquidated Obligations 1942		2,383.28						2,383.28
Encumbrances 1941-1942			13,957.68					13,957.68
Total Necessary & Reg. Expenses	$132,582.50	$34,336.75	$121,765.94	$8,215.98	$18,060.01		$143,438.68	$458,399.86

Charges After Books Closed $461.81.

MATERNAL AND CHILD HEALTH

LUCILLE J. MARSH, M.D., Director

The Bureau of Maternal and Child Health endeavors through cooperation with the other bureaus and agencies to improve the health conditions of the mothers and children in the State. In doing this there are many different facets to the work. There are a few tangible things that can be reported upon, but there are also many intangible phases of the work difficult to evaluate definitely. There must be the study of the problems existing in the State and some attempt at defining their causes. There must be the education of personnel dealing with the various problems of public health. There should be a plan of attack to combat the preventable difficulties.

Although the Bureau of Maternal and Child Health began the year without a director, the services of the Bureau continued as planned by Dr. R. C. Hood.

Post graduate training in public health was provided for nurses qualified to take such training. Efforts were made to find registered nurses who were interested in training as certified nurse-midwives. Supervision of the midwives and training periods for them were kept up throughout the year.

Money was furnished to provide instructors in obstetrics and pediatrics for the Post Graduate Medical Course given by the Florida Medical Association. Only one director of a local health unit could take time to go to the Pediatric Assembly in Saluda.

A hemoglobin study was conducted in prenatal clinics at various points in Florida, but no evaluation of the results has yet been made. Feosol has been furnished for use in clinics.

Supplies for the county health units were issued from the stores in the State office. Among these were rubber gloves, syringes, infantometers, bandage scissors, pelvimeters, specula, and stethoscopes.

The trailer for the hookworm control program could not be utilized because of lack of personnel. It was, therefore, turned over to the Bureau of Dental Health and has been put to good use as a dental clinic.

The number of physicians found for work in MCH clinics throughout the State increased nearly fifty per cent. Comparative statistics for immunization, antepartum examinations, etc., are shown in the accompanying table.

Maternal mortality rates for 1942 were the lowest ever recorded for the State of Florida. The infant death rate also dropped but not as sharply as did the maternal mortality. Prematurity is still one of the leading causes of death for infants under a year old. A low cost incubator has been devised and a few have been made. These will be loaned to county health units as needed in an attempt to combat death from prematurity.

Aid to the Pensacola Maternity Home, a project which provides hospitalization for obstetrical patients in the low income groups, was continued.

The problem of providing care for the young wives and infants of the enlisted men in Florida was becoming acute even before Dr. Hood, the previous director, left in November, 1942. He had tentatively worked out plans whereby hospitalization could be provided, to be paid for at a flat rate from MCH funds. Before this plan had gotten well under way, Congress appropriated $1,200,000.00 to be used to pay both hospital and physician for the maternity and infant care of the families of enlisted men. This money was in the form of a grant to the States to be administered by the State Departments of Health.

In June, 1943, Dr. Hoffman of the Bureau of Epidemiology consented to serve as Acting Director of the Bureau of Maternal and Child Health. Under his direction, the Florida plan for the Emergency Maternity and Infant Care program was outlined and approved. Arrangements with the first hospitals were made and the EMIC program got under way. It grew very rapidly and by the time the present director joined the bureau in September 1943, there were 14 hospitals participating. Applications for care continued to pour in, and by January 1st there were 60 hospitals participating. There were 3,125 applications approved and many more waiting for approval.

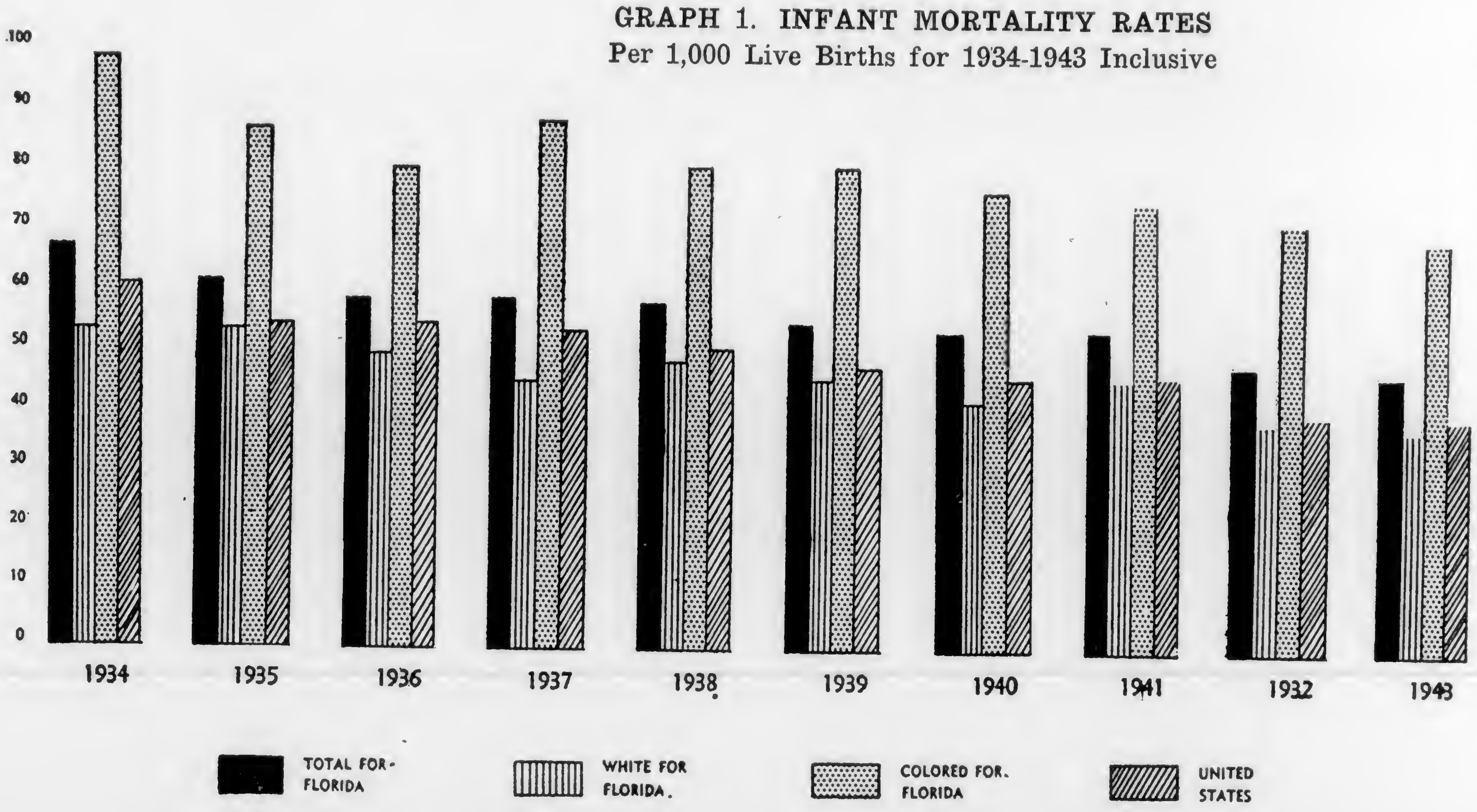
The rapidity with which the EMIC program grew caused so much work to keep it going smoothly, that very little except the routine programs of the bureau could be carried on during the last six months of the year.

Since the original grant was made, Congress has found it necessary to appropriate more money. The total sum granted to Florida up to January 1st was $171,192.00.

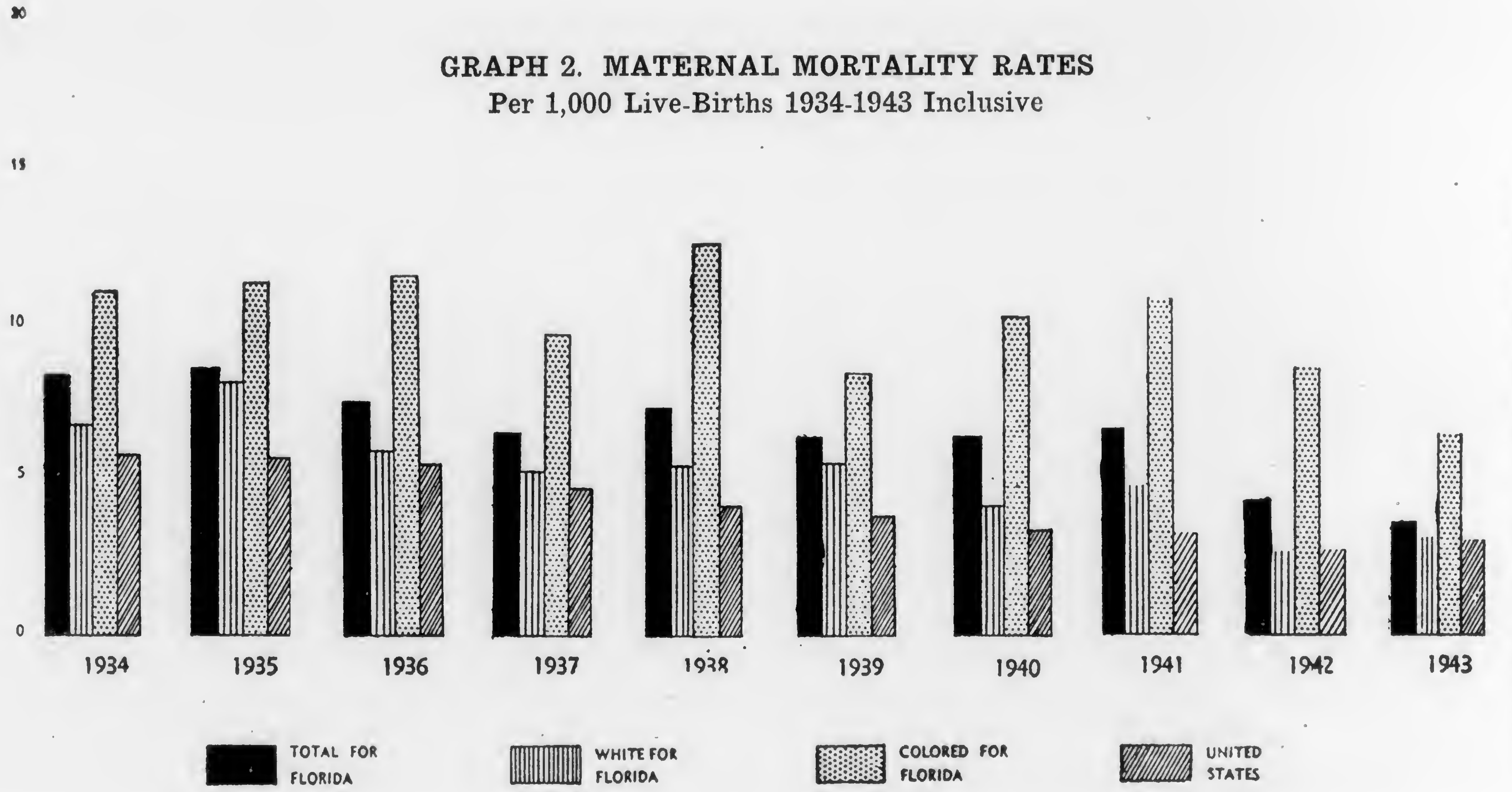
A knowledge of the principals of nutrition is a definite need in the improvement of the health of the mothers and children. The nutritionist on the staff has been working toward the dissemination of this knowledge as well as toward the application of the principles. Visits to county health units for consultation with the workers in the unit are arranged whenever time permits. Both the director of the bureau and the nutritionist have cooperated in the plans of the Nutrition Committee of the State Defense Council for the nutrition program for the State. The nutritionist also helped in the development of the Sanitary Code for the School Lunch Rooms. Educational materials on nutrition have been prepared and sent out from time to time. During the early days of the EMIC program, the nutritionist, like everyone else in the bureau, had to devote most of her time in an attempt to interpret the program to the hospitals in the State. Next year there are even more ambitious plans for the development of consultation services in nutrition througout the State.

COMMUNICABLE-DISEASE CONTROL **Immunization (persons immunized)**	**1938**	**1939**	**1940**	**1941**	**1942**
Smallpox	26,716	23,187	18,093	14,011	30,087
Diphtheria, under 1 year	2,854	3,020	1,508	2,563	2,858
Diphtheria, 1 through 4 years	9,340	8,652	4,133	6,294	6,478
Diphtheria, 5 years and over	13,914	16,224	6,690	7,763	16,016
MATERNITY SERVICE					
Cases admitted to antepartum medical service	3,813	4,594	3,858	5,485	4,962
Cases admitted to antepartum nursing service	9,793	8,433	5,228	6,617	6,454
Visits by antepartum cases to medical conferences	9,976	11,152	13,153	18,842	12,539
Field and office nursing visits to and by antepartum cases	22,841	23,868	13,526	16,703	18,091
Cases given nursing service at delivery	471	632	119	59	107
Cases given postpartum medical examination	752	936	879	1,722	1,577
Cases admitted to postpartum nursing service	4,634	5,056	3,141	3,985	4,855
Nursing visits to postpartum cases	10,168	10,885	6,948	7,355	13,103
Visits for midwife supervision		2,382	1,804	1,395	2,275
Attendance at maternity classes	3,301	3,980	1,127	448	1,149
INFANT HYGIENE					
Individuals admitted to medical service	3,219	3,373	2,024	3,176	3,354
Individuals admitted to nursing service	5,494	5,738	4,717	6,173	8,526
Visits to medical conferences	3,322	4,314	4,581	6,527	6,985
Field and office nursing visits	15,519	16,340	12,707	18,133	22,881
PRESCHOOL HYGIENE					
Individuals admitted to medical service	4,629	5,457	2,733	5,339	5,895
Individuals admitted to nursing service	9,294	9,762	5,439	6,213	10,381
Visits to medical conferences	6,752	6,040	6,061	9,961	10,446
Field and office nursing visits	16,947	17,562	14,343	18,308	29,800
Inspections by dentists or dental hygienists	1,197	1,795	313	267	304
Attendance at infant and preschool classes	1,897	2,651	259	245	57
SCHOOL HYGIENE					
Examinations by physicians (includes item below)	33,084	30,634	42,285	33,394	24,378
Examinations by physicians with parents present (included above)	3,067	3,132	3,566	2,186	3,208
Field nursing visits	41,853	28,481	13,094	12,287	20,567
Office nursing visits	13,066	16,186	10,422	12,718	44,839
Inspections by dentists or dental hygienists	32,091	105,761	17,311	20,774	12,325

GRAPH 1. INFANT MORTALITY RATES
Per 1,000 Live Births for 1934-1943 Inclusive



GRAPH 2. MATERNAL MORTALITY RATES
Per 1,000 Live-Births 1934-1943 Inclusive



LABORATORIES

PEARL GRIFFITH, Acting Director

A total of 1,320,058 tests were performed in the laboratories of the Florida State Board of Health during the year, 1943, despite the handicaps of insufficient personnel and delays in obtaining supplies and equipment. A summary of the services rendered is presented through the appended reports of the central and four branch laboratories. Approximately 55% of the examinations were made in the central laboratory and 45% in the branches. In addition to routine analysis, the central laboratory prepares and furnishes antigen, antisera, special media, staining solutions and other supplies to the branch laboratories. Table I summarizes the examinations of all five laboratories. The various ways in which work was distributed among the laboratories is presented in Table II. Tables III to VII give a summary of the activities of the individual laboratories. Table VIII shows the distribution of the biological products furnished by the laboratories of the Florida State Board of Health.

PARASITOLOGY. A slight decrease occurred in the number of specimens submitted for parasitological examinations, a total of 91,103 being received. Hookworm ova were found in 20,316, while Ascaris, Oxyuris, tapeworm, Trichiuris and Strongyloides were found in smaller numbers. The fish tapeworm—Diphyllobothrium latum—was found in five specimens. These specimens were submitted from a single section of the State. Many surveys have been conducted to establish the incidence of hookworm disease in Florida and our results show that much work remains to be done to reduce the intestinal parasitic infestation in the State. Protozoan cysts were found in 6,712 specimens. Special media for culturing Endamoeba histolytica is prepared in the central laboratory and used as an aid in diagnosing and studying ameba.

Examination of all feces includes an examination for the ova and parasites of hookworm, Ascaris, Oxyuris, tapeworm, Trichiuris and Strongyloides and for protozoan cysts.

MALARIA. There were 19,959 blood smears examined for the presence of malarial parasites and 57 were reported positive. This would indicate a decrease in the incidence of malaria in the State.

DIPHTHERIA. Cultural examinations were made on 18,521 throat specimens for diphtheria and streptococci. This was a slight increase over 1942 but the percentage of positives remained approximately the same. Fusiform bacilli and Spirochaetes associated with Vincent's infection were found on 912 specimens from the throat and mouth.

TUBERCULOSIS. Examinations were made on 15,047 specimens of sputum for tubercle bacilli. Routine culturing of sputum for tubercle bacilli, which was discontinued several months ago, has been resumed on all specimens showing doubtful or atypical acid-fast bacilli. The experimental work being conducted in the central laboratory for detecting tubercle bacilli by the use of fluorescence stains has been discontinued for the present due to the shortage of workers. Animal inocculation tests for tuberculosis were made on 35 specimens of sputum.

AGGLUTINATION TESTS. Tests for typhoid H and O agglutinins, paratyphoid A & B, Proteus OX19, Brucella infection, P. tularense and Rocky Mountain Spotted Fever were run on 28,289 specimens of blood. All antigens used in this work are prepared in the central laboratory from stock strains obtained from the National Institute of Health, Bethesda, Maryland.

The heterophile agglutination test for infectious mononucleosis was performed on 46 specimens submitted for this test.

BLOOD CULTURES. Cultural examinations were made on the clots of 4,390 blood specimens received for agglutination tests. Eberthella typhosa was isolated from seven specimens.

STOOL AND URINE CULTURES. Specimens of stool and urine submitted for examination for organisms causing enteric diseases have more than doubled during the year. Cultural examinations were made on 11,219 specimens for organisms of the Typhoid-Salmonella-Dysentery group. Isolations of Eberthella typhosa were made from 110 specimens. Salmonella organisms isolated from 114 specimens were:

S. anatum	10	S. hartford	2	S. oranienberg	11
S. bareilly	3	S. inverness	1	S. oregon	4
S. bredeney	4	S. java	2	S. rubislaw	2
S. carrau	1	S. litchfield	2	S. sandiego	2
S. coli	1	S. madelia	2	S. schottmuelleri	2
S. derby	5	S. meleagridis	14	S. senftenberg	1
S. florida	2	S. montevideo	8	S. sendai	4
S. gaminara	1	S. newington	4	SS typhi-murium	9
S. give	5	S. newport	10	S. ” var. Copenhagen	2

Some of the organisms which could not be identified in the laboratories, since we do not carry all of the antisera in stock, were sent to the National Salmonella Center at Lexington, Kentucky, for final identification.

Isolations were made from 115 cultures for bacillary dysentery. The types isolated were Shigella alkalescens, Shigella boyd 88, Shigella dispar, Shigella flexner and Shigella sonne.

GONORRHEA. A total of 78,244 smears were examined for suspected gonorrhea and 11,005 cultures for the isolation of the gonococcus were made. A large part of the increase in these specimens is due to the Venereal Disease Control Program being carried on in the State. Many of the smears were submitted from patients undergoing treatment at the State Board of Health Venereal Disease Hospitals. In the State laboratories, as in other public health laboratories, the increase in the examinations for gonorrhea and syphilis during the past two or three years has resulted in an inordinate proportion of the total activity of the laboratories being devoted to this work.

SYPHILIS. Serodiagnostic tests for syphilis constituted a numerical majority of the tests performed. A total of 958,186 tests were made on blood specimens by the Kahn standard, Eagle macroflocculation and Mazzini microflocculation technic. Kahn qualitative and quantitative tests were made on 10,019 spinal fluids. The Eagle macroflocculation test was discontinued in the central laboratory the early part of the year but will be resumed at an early date. As during the past year, a large number of the serological tests were made on selectees for military service, and on specimens submitted from the Army and Navy training points and Air Stations in the State.

The central laboratory again participated in the annual Evaluation Study on Serodiagnostic Tests for Syphilis conducted by the U. S. Public Health Service. Our results were again approved.

RABIES. There was a decrease shown in the number of specimens submitted for rabies and also in the number found positive. Of the 464 animal brains examined, 120 showed the presence of Negri bodies.

MISCELLANEOUS. Miscellaneous determinations include smears, cultures and other special examinations which could not be classified under the preceding headings.

WATER AND MILK ANALYSIS. Bacteriological examinations were requested on 15,860 samples of water requiring 38,374 tests. All tests were performed in accordance with standard methods for water analysis as outlined by the American Public Health Association. Chemical tests were performed on 1,313 samples of water. As during the previous year much of the increase in this work is due to the establishment of the various Army camps throughout the State.

A total of 23,489 examinations of milk and milk products were performed. Standard methods and equipment are used in all of the laboratories. Cryoscopic determinations for the presence of added water have been made a part of the routine of the laboratories during the year.

MEDIA. The growth of the laboratory work during the past few years has resulted in a great increase in the amount and types of media required. A total of 2,262 liters of various liquid and solid media were prepared in the central laboratory. This includes media for miscellaneous examinations, for special studies and for preparation of diagnostic material.

EQUIPMENT AND SUPPLIES. A few additions to equipment and supplies were made during the year. One large Precision incubator was purchased for the Pensacola laboratory. The Tampa laboratory, which was remodeled last year, again requires additional space to care for the increased activities of that branch. The Pensacola laboratory is badly overcrowded. An additional bacteriologist was assigned to that laboratory a few months ago. Unless added space is provided a curtailment of some lines of work or transfer of work to other laboratories will become necessary. The laboratory building in Pensacola, with the exception of one room used for laboratory work and one small washroom, is now occupied by other health agencies. It is urgently requested that some of these agencies secure quarters elsewhere in order that the laboratory may have the additional space necessary for laboratory purposes.

LABORATORY PERSONNEL. There has been a continuing difficulty again in the past year in securing trained technical workers. The majority of new personnel are individuals just out of college. While the individuals usually have excellent theoretical background, they must be taught routine methods used in the laboratories and this cannot be accomplished in a few days or a few weeks. Some of these new persons have remained only a few months since, in the present situation, they are offered more lucrative positions elsewhere.

FUTURE PLANS AND RECOMMENDATIONS. No major changes have been made in the types of work handled during the past year and no new activities of any scope have been added. The large increase in routine work in existing lines and the obvious uncertainty as to subsequent conditions which prevail during war time seriously hampers the plans for undertaking new lines of work. Each increase in laboratory work of any sort will require the addition of new workers. It is recommended therefore, that no new type of work be undertaken at this time unless it is of immediate importance to the war effort or the civilian health essential to that effort.

There have been some increases in salaries during the year but it is recommended that the salaries of those now employed be increased sufficiently to provide a means of stabilizing workers in their jobs. Even with the increases requested, the State will not be in a position to compete with the Army or private firms for the better grade of personnel.

For the first time in a number of years no member of the staff was detailed for advanced training. The reason for this was the acute shortage of experienced workers to handle the increasing volume of routine examinations. It is hoped that this action will not again be necessary as it is only by this means that an adequately trained staff of competent individuals can be maintained. Several of the bacteriologists from the branch laboratories were detailed to the central laboratory for more specific instructions.

LABORATORY VISITORS. Many persons visited this department during the year. Some were making routine business calls while others were interested in the work of the laboratory. Many of these persons were from outside the State and some from other countries.

The construction of the laboratory building which was approved during 1942 has been temporarily postponed. The expanding activities of the bureau have increased the need for space, especially space for filing the necessary laboratory records. Many of these must be removed from the laboratory each year to accommodate incoming records. An enclosed sterile room for culture work is also needed.

The loyal support given by the entire force in order to handle the large volume of work is acknowledged.

TABLE 1.—SUMMARY REPORT OF LABORATORIES FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	Total	Grand Total
Intestinal Parasites						
Total No. Specimens Examined	—	—	—	—	—	91,103
Helminths ova	—	—	—	—	84,391	
Hookworm	20,316	60,289	—	985	—	
Ascaris	1,678	—	—	—	—	
Oxyuris	408	—	—	—	—	
Tapeworm	105	—	—	—	—	
Trichuris	601	—	—	—	—	
Strongyloides	9	—	—	—	—	
Protozoan cysts	—	—	—	—	6,712	
Endamoeba coli	3,858	—	—	—	—	
E. histolytica	352	—	—	—	—	
Endolimax nana	736	—	—	—	—	
Chilomastix mesnili	52	—	—	—	—	
Giardia lamblia	1,639	—	—	—	—	
Iodameba	75	—	—	—	—	
Throat Specimens						
Diphtheria						
Cultures	305	15,091	2	112	15,510	
Virulence Tests	2	—	—	—	2	
Vincent's angina	912	1,849	—	11	2,772	
Streptococcus	120	117	—	—	237	18,521
Malaria						
Tertian	51	15,854	—	48	15,953	
Estivo-autumnal	5	—	—	—	5	
Untyped	1	—	—	—	1	15,959
Agglutination Tests						
Typhoid						
"H" Agglutinins	277	6,096	242	434	7,049	
"O" Agglutinins	110	4,347	102	—	4,559	
Paratyphoid A	46	1,979	57	13	2,095	
Paratyphoid B	41	1,985	53	13	2,092	
Weil-Felix	445	4,167	160	17	4,789	
Brucella abortus	120	4,841	66	82	5,109	
P. tularense	7	2,536	19	26	2,588	
Rocky Mt. Spotted Fever	—	8	—	—	8	28,289
Cultures						
Blood						
Typhoid	7	4,339	—	4	4,350	
Brucella	1	39	—	—	40	4,390
Stool and Urine						
Typhoid	110	10,616	—	47	10,773	
Salmonella	127	—	—	—	127	10,900
Stool						
Bacillary Dysentery	115	202	—	2	319	319
Tuberculosis						
Microscopic						
Acid-fast stain	1,949	12,790	—	308	15,047	
Cultures	155	426	9	10	600	
Animal inoculation	—	—	—	—	35	15,682
Veneral Diseases						
Gonorrhea						
Smears	8,280	69,134	—	498	77,912	
Cultures	2,845	7,899	147	114	11,005	
Ophthalmia	24	301	—	7	332	89,249

TABLE 1—SUMMARY REPORT OF LABORATORIESFOR YEAR 1943 (Cont.)

	Positive	Negative	Doubtful	Unsat.	Total	Grand Total
Syphilis						
Kahn						
Blood						
Qualitative	123,808	479,731	11,494	41,395	656,428	
Quantitative	16,193	11			16,204	
Verification test	296	5			301	
Evaluation test	44	31	3	2	80	673,013
Spinal fluid						
Qualitative	1,069	8,157	16	36	9,278	
Quantitative	735	6			741	10,019
Eagle						
Blood						
Qualitative	32,134	146,084	9,394	1,643	189,255	189,255
Mazzini						
Blood						
Qualitative	22,842	50,392	4,209	8,376	85,819	
Evaluation test	48	18	12	2	80	85,899
Darkfield	39	116	2	16	173	173
Chancroid		2			2	2
Granuloma inguinale		1			1	1
Rabies						
Dogs	116	244		12	372	
Cats	2	60		2	64	
Other animals	2	25		1	28	
Animal inoculations		1			1	465
Miscellaneous						
Smears					2,568	
Cultures					337	
Meningitis cerebrospinal	3	140			143	
Globulin cerebrospinal					4,420	
Infect. mononucleosis		45		1	46	
Leprosy		5			5	7,519

PHOTOELECTRIC COLORIMETRIC DETERMINATIONS

Hemoglobin	2,622	
Protein cerebrospinal fluid	6,489	9,111

	No. Samples Examined	Total No. Tests Made	
WATER			
Bacteriological	15,860	38,374	38,374
Chemical			
Water	359	1,140	
Miscellaneous	57	173	1,313
MILK PRODUCTS			
Milk	5,424	19,849	
Cream	440	1,338	
Ice Cream	505	1,251	
Chocolate Milk	218	610	
Cryoscope	24	36	
Buttermilk	1	1	
Goat Milk	1	4	
Milk Bottles	252	283	
Miscellaneous	105	117	23,489
MISCELLANEOUS			
Swab tests on drinking glasses	4,275	5,566	
Meat reconstruction	6	6	
Solutions	1,441	1,441	7,013
TOTAL			1,320,058

TABLE 2.—EXAMINATIONS MADE IN THE LABORATORIES DURING THE YEAR 1943

LABORATORIES	Bacteriological	Serological	Milk and Water	TOTAL
CENTRAL				
Jacksonville, Fla.	185,780	484,624	30,010	700,414
BRANCHES				
Tampa, Fla.	55,779	234,346	5,450	295,575
Pensacola, Fla.	12,431	42,308	4,664	59,403
Miami, Fla.	33,060	185,813	20,684	239,557
Tallahassee, Fla.	11,646	11,095	2,368	25,109
TOTAL	298,696	958,186	63,176	1,320,058

TABLE 3.—ANNUAL REPORT OF CENTRAL LABORATORY, JACKSONVILLE, FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Intestinal Parasites						
Total No. Specimens Ex.						64,534
Helminths ova					57,976	
Hookworm	15,053	39,855		911		
Ascaris	1,402					
Oxyuris	294					
Tapeworm	67					
Trichuris	388					
Strongyloides	6					
Protozoan cysts					6,558	
Endamoeba coli	3,808					
E. histolytica	350					
Endolimax nana	736					
Chilomastix mesnili	35					
Giardia lamblia	1,554					
Iodameba	75					
Throat Specimens						
Diphtheria						
Cultures	131	9,457		3	9,591	
Virulence Tests	2				2	
Vincent's angina	114	497		3	614	
Streptococcus	72	99			171	10,378
Malaria						
Tertian	33	10,123		10	10,166	
Estivo-autumnal	4				4	
Untyped						10,170
Agglutination Tests						
Typhoid						
"H" Agglutinins	82	3,431	104	324	3,941	
"O" Agglutinins	67	3,403	65		3,535	
Paratyphoid A	4	657	15	13	689	
Paratyphoid B	3	658	13	13	687	
Weil-Felix	294	2,887	111	16	3,308	
Brucella abortus	75	3,252	54	35	3,416	
P. tularense	4	1,756	16	26	1,802	
Rocky Mt. Spotted Fever		8			8	17,386
Cultures						
Blood						
Typhoid	7	4,330			4,337	
Brucella	1	36			37	
Other organisms						4,374
Stool and Urine						
Typhoid	96	8,461		15	8,572	
Salmonella	114				114	8,686
Stool						
Bacillary Dysentery	107				107	107
Tuberculosis						
Microscopic						
Acid-fast stain	1,366	9,339		225	10,930	
Cultures	155	426	9	10	600	
Animal inoculation					35	11,565
Venereal Diseases						
Gonorrhea						
Smears	4,483	38,119		220	42,822	
Cultures	7	274		10	291	
Ophthalmia	11	200		3	214	43,327
Syphilis						
Kahn						
Blood						
Qualitative	79,994	291,856	3,990	35,508	411,348	
Quantitative	14,241				14,241	
Verification test	30	5			35	
Evaluation test	44	31	3	2	80	425,704
Spinal fluid						
Qualitative	725	5,568	1	29	6,323	
Quantitative	528				528	6,851
Mazzini						
Blood						
Qualitative	14,559	30,404	717	6,309	51,989	
Evaluation test	48	18	12	2	80	52,069
Darkfield	3	29		4	36	36
Chancroid		2			2	2

TABLE 3.—ANNUAL REPORT OF CENTRAL LABORATORY, JACKSONVILLE, FOR YEAR 1943 (Continued)

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Rabies						
Dogs	113	198		11	322	
Cats	1	49		1	51	
Other animals	2	19		1	22	
Animal inoculations		1			1	396
Miscellaneous						
Smears		2,317			2,317	
Cultures		288			288	
Cerebrospinal meningitis	3	140			143	
Globulin cerebrospinal fluid		4,420			4,420	
Infectious mononucleosis		46			46	
Leprosy		5			5	
Solutions					1,441	4,240
PHOTOELECTRIC COLORIMETRIC DETERMINATIONS:						
Hemoglobin					1,698	
Protein cerebrospinal fluid					4,460	6,158

	No. Samples Examined	Total Number Tests Made	
WATER			
Bacteriological	10,421	26,269	26,269
Chemical			
Water	62	843	
Miscellaneous	55	171	
Sewage & polluted water	2	2	1,016
MILK PRODUCTS			
Milk	689	2,674	
Cream	3	4	
Chocolate milk	11	22	
Cryoscope	6	12	
Buttermilk	1	1	
Goat milk	1	4	
Sterile bottles	8	8	2,725
TOTAL			700,414

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.

		Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
INTESTINAL PARASITES:															
Hookworm:	Pos.	1,161	1,842	2,026	1,017	761	632	821	1,027	1,056	1,597	1,534	1,579	15,053	
	Neg.	3,242	4,467	4,622	3,152	2,413	2,218	2,199	2,394	3,071	3,735	4,070	4,272	39,855	
	Unsat.	82	59	73	55	64	22	44	49	94	154	99	116	911	
Ascaris		143	214	156	85	73	55	55	53	60	112	150	246	1,402	
Oxyuris		21	24	21	19	18	12	14	23	31	38	41	32	294	
Tapeworm															
D. latum									1			1	3	5	
H. nana		1	6	1	3	6	8	6	1	3	8	8	5	56	
T. saginata				2	1		1	1			1			6	
Trichuris		23	19	20	25	70	23	31	33	21	71	30	22	388	
Strongyloides		1	3						1			1		6	57,976
Protozoan Cysts															
Endameba coli		283	366	449	237	107	175	241	320	270	421	485	454	3,808	
E. histolytica		20	11	39	29	19	19	34	30	34	29	56	30	350	
Endolimax nana		58	55	72	57	25	44	69	68	58	83	90	57	736	
Chilomastix mesnili		1	2	5	2	2	5	7	1	2	1	2	5	35	
Giardia lamblia		101	55	114	116	53	93	124	198	162	178	224	136	1,554	
Iodameba		8	7	9	7	2	7		7	4	6	3	15	75	6,558
THROAT SPECIMENS:															
Diphtheria:	Pos.	6	2	2			2	9	6	13	36	42	13	131	
	Neg.	826	668	651	474	555	606	770	498	864	1,574	1,269	702	9,457	
	Unsat.				1	1		1						3	9,591
Virulence Test:	Pos.								1		1			2	2
Vincent's Angina:	Pos.	5	1	12	9	6	12	10	13	8	14	10	14	114	
	Neg.	40	47	78	58	52	40	37	18	25	33	37	32	497	
	Unsat.								1	2				3	614
Streptococcus:	Pos.	10	22	6	3	8	1	5	3	3	3	3	5	72	
	Neg.	6	19	15	10	9	7	5	3	5	5	5	10	99	171
MALARIA:	Pos.	2	5	4	1	4		8	5	2	3	2	1	37	
	Neg.	1,180	1,219	776	590	734	1,055	916	988	888	566	487	724	10,123	
	Unsat.					3		2		1	4			10	10,170
AGGLUTINATION TESTS:															
Typhoid 'H' Agglutinins:	Pos.	6	6	6	12	9	7	12	3	11	2	5	3	82	
	Neg.	177	184	203	235	288	396	469	432	358	249	265	175	3,431	
	Partial	2	5	3	4	9	14	24	9	13	8	1	12	104	
	Unsat.	4	5	8	3	42	42	47	59	60	32	14	8	324	3,941

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
AGGLUTINATION TESTS:															
Typhoid 'O' Agglutinins:	Pos.	2	6	3	6	9	7	12	3	11	2	3	3	67	
	Neg.	178	185	204	235	286	388	460	411	363	249	259	185	3,403	
	Partial	4	2	3	6	5	8	12	8	6	8	2	1	65	3,535
Paratyphoid A:	Pos.			1		1	2							4	
	Neg.	50	42	47	40	74	60	88	48	56	53	63	36	657	
	Partial			2	1		3	2		1		2	4	15	
	Unsat.			6	2	1		1	1		2			13	689
Paratyphoid B:	Pos.			1			2							3	
	Neg.	50	42	48	39	75	62	88	46	56	53	64	35	658	
	Partial			1	2		1	2		1		1	5	13	
	Unsat.			6	2	1		1	1		2			13	687
Weil-Felix:	Pos.	14	11	25	13	17	41	40	18	23	30	40	22	294	
	Neg.	171	173	184	214	252	322	397	331	294	201	196	152	2,887	
	Partial	2	4	10	12	14	12	6	19	11	6	8	7	111	
	Unsat.					1	4	4	3		2		2	16	3,308
Brucella abortus:	Pos.	4	2	6	10	11	13	10	5	4	4	5	1	75	
	Neg.	199	196	234	265	302	366	416	323	306	234	234	177	3,252	
	Partial	3	5	2	4	6	7	5	7	5	4	3	3	54	
	Unsat.			4	1	11	12	1	3		2		1	35	3,416
P. Tularense:	Pos.						1	2			1			4	
	Neg.	115	96	113	126	160	191	240	186	142	140	136	111	1,756	
	Partial	1	1	2	3		1	1	1		1	3	2	16	
	Unsat.			7	3	2	4	2	3		3	1	1	26	1,802
Rocky Mountain Spotted Fever:	Neg.		2	2		2		2						8	8
CULTURES															
Blood Typhoid:	Pos.				1	5	1							7	
	Neg.	263	252	287	354	374	453	540	488	428	321	322	248	4,330	
Brucella:	Pos.						1							1	
	Neg.	5	4	3	10	5	5	1	2		1			36	4,374
Stool & Urine Typhoid:	Pos.	6	7	2	2	8	10	5	23	9	14	7	3	96	
	Neg.	260	286	312	423	462	780	783	939	1,051	1,271	1,018	876	8,461	
	Unsat.		1		2	8				1	1	2		15	8,572

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
CULTURES															
Salmonella															
S. anatum				1				1			2	5	1	10	
S. bareilly								1			2			3	
S. bredeney										1		2	1	4	
S. carrau									1					1	
S. coli							1							1	
S. derby					1	1		2			1			5	
S. florida											1	1		2	
S. gaminara											1			1	
S. give							1			1		3		5	
S. hartford			1						1					2	
S. inverness							1							1	
S. java					1			1						2	
S. litchfield					1		1							2	
S. madelia								1		1				2	
S. meleagridis						9	3						2	14	
S. montevideo					1			1		1	1		4	8	
S. newington						1	1		2					4	
S. newport				1	1			4			1	2	1	10	
S. oranienberg					2	1	3		3				2	11	
S. oregon										3	1			4	
S. rubislaw								1		1				2	
S. sandiego											2			2	
S. schotmuelleri						1							1	2	
S. senftenberg								1						1	
S. sendai							1		1	2				4	
S. typhi-murium		1			2			2					4	9	
S. var. copenhagen												2		2	114
Stool															
Bacillary															
Dysentery															
S. alkalescens		2		6	4	7	2				3	4	5	33	
S. boyd-88				1	1	2			1	1	6	2	4	18	
S. dispar											2	2		4	
S. flexner		6	2	3		4	5	2		1	1	1		25	
S. sonne						2	3	3	3	4	7	1		23	
Undetermined				1		1		2						4	107
TUBERCULOSIS															
Microscopic:	Pos.	55	91	125	91	115	98	201	101	141	140	122	86	1,366	
	Neg.	721	763	985	781	911	850	949	763	625	658	662	671	9,339	
	Unsat.	11	11	20	20	24	22	24	22	19	9	23	20	225	10,930

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
TUBERCULOSIS															
Cultures:		2	2	1	11	74	57	80	85	56	91	70	71	600	600
Animal Inoculations:		5	3	3	1	2	3	6	3		5	2	2	35	35
GONORRHEA															
Smears:	Pos.	287	341	494	662	550	496	298	320	332	248	242	213	4,483	
	Neg.	2,110	2,147	3,013	2,902	3,199	4,387	4,188	3,609	3,702	3,816	3,068	1,978	38,119	
	Unsat.	12	14	26	22	21	16	19	4	31	18	18	19	220	42,822
Cultures:	Pos.		2	1		1			1			2		7	
	Neg.	9	11	22	30	38	28	22	33	25	19	28	9	274	
	Unsat.				1	2	3					4		10	214
OPHTHALMIA:	Pos.			2	1	3	1	1		2			1	11	
	Neg.	14	10	8	10	19	21	22	27	41	16	8	4	200	
	Unsat.			1		1							1	3	
SYPHILIS															291
Kahn															
Blood															
Evaluation Test:	Pos.		33	11										44	
	Neg.		25	6										31	
	Doubtful		2	1										3	
	Unsat.		1	1										2	80
Qualitative:	Pos.	7,168	6,755	7,944	7,470	6,944	6,275	5,981	5,184	5,860	7,209	6,804	6,400	79,994	
	Neg.	29,062	27,656	29,050	24,686	24,723	23,359	23,847	20,608	20,876	24,391	22,651	20,947	291,856	
	Doubtful	534	355	609	477	315	350	342	299	285	184	130	110	3,990	
	Unsat.	1,756	1,414	1,997	2,081	3,757	4,911	3,864	4,184	3,554	3,576	2,030	2,384	35,508	411,348
Quantitative:	Pos.	629	581	846	1,207	1,077	1,188	1,204	1,146	1,530	1,581	1,571	1,681	14,241	14,241
Verification Test:															
	Pos.				5	8	1	6	2	2		6		30	
	Neg.				2	2	1							5	35
Spinal Fluid															
Qualitative:	Pos.	45	40	58	47	86	77	66	69	67	56	66	48	725	
	Neg.	283	371	439	390	498	584	543	674	498	499	430	359	5,568	
	Doubtful				1									1	
	Unsat.			4	5	2	2	3	4	3	2	1	3	29	6,323
Quantitative:	Pos.	36	30	40	29	55	52	48	59	48	38	57	36	528	528
Mazzini															
Blood															
Evaluation Test:															
	Pos.		37	11										48	

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
SYPHILIS															
Mazzini															
Blood															
Evaluation Test:	Neg.		13	5										18	
	Doubtful		10	2										12	
	Unsat.		1	1										2	80
Qualitative:	Pos.	1,398	1,120	1,342	1,129	1,077	1,420	1,967	1,617	1,179	670	766	874	14,559	
	Neg.	1,402	959	1,408	1,510	3,303	4,504	3,421	3,737	3,259	2,701	1,979	2,221	30,404	
	Doubtful	89	66	82	113	151	125	30	5	6	34	5	11	717	
	Unsat.	202	169	290	290	531	1,134	796	733	750	674	339	401	6,309	51,989
Darkfield:	Pos.			2							1			3	
	Neg.	4	2	4	4	3	1	1	4			3	3	29	
	Unsat.	1		1								1	1	4	36
Chancroid:	Neg.				1	1								2	2
Granuloma inguinale:	Neg.									1				1	1
RABIES															
Dog:	Pos.	9	12	10	6	9	7	10	10	14	6	6	14	113	
	Neg.	10	15	18	16	24	13	19	23	8	18	17	17	198	
	Unsat.	1		1		1		1	4	1	1		1	11	
Cat:	Pos.		1											1	
	Neg.	6	4	3	4	5	1	6	4	3	1	7	5	49	
	Unsat.												1	1	
Other animals:	Pos.					1		1						2	
	Neg.		1	1	2	4	2	2	3	1	1	2		19	
	Unsat.					1								1	395
Animal inoculations:							1							1	1
LEPROSY:	Neg.				1	1				1		2		5	5
CEREBROSPINAL															
MENINGITIS:	Pos.						1		1				1	3	
	Neg.			65	7		25	20	15	7			1	140	143
HEMOGLOBIN:		126	101	132	135	209	179	198	142	132	137	114	93	1,698	1,698
PROTEIN-Spinal fluid		185	210	287	283	447	502	469	562	414	445	370	286	4,460	4,460
GLOBULIN- " "		185	210	285	279	443	502	467	544	410	443	366	286	4,420	4,420
MISCELLANEOUS															
Smears:		175	43	59	85	262	389	11	523	240	105	409	16	2,317	
Cultures:		21	19	15	37	56	26	22	21	13	18	19	21	288	
Solutions:		93	233	76	76	128	176	105	120	128	52	136	118	1,441	
Infectious mononucleosis:	Neg.	1		1	2	5	2	4	9	5	5	7	5	46	4,092

TABLE 4.—REPORT OF CENTRAL LABORATORY AT JACKSONVILLE BY MONTHS—1943.—(Continued)

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
WATER														
Bacteriological:	2,445	2,492	1,967	2,086	2,258	2,636	2,261	2,766	2,276	1,880	1,666	1,536	26,269	26,269
Chemical														
Water	42	64	104	16	36	84	133	60	104	58	43	101	845	
Miscellaneous	17	31	17			14		15	6	25	28	18	171	1,016
MILK PRODUCTS														
Milk:	297	203	212	221	312	199	283	215	251	124	143	214	2,674	
Cream:							2		2				4	
Buttermilk:		1											1	
Chocolate milk:	2	2					2	2	8	2	2	2	22	
Goat milk:	4												4	
Cryoscope:			6	2						2		2	12	
Milk bottles:												8	8	2,725
TOTAL	58,199	57,310	63,015	55,232	59,149	63,000	61,049	57,458	56,819	61,559	55,753	51,871	700,414	700,414

TABLE 5.—ANNUAL REPORT OF TAMPA LABORATORY FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Intestinal Parasites						
Total No. Specimens Ex.						20,608
Helminths ova					20,607	
Hookworm	4,078	16,036		23		
Ascaris	209					
Oxyuris	52					
Tapeworm	18					
Trichuris	191					
Protozoan cysts					1	
E. histolytica	1					
Throat Specimens						
Diphtheria						
Cultures	46	3,996		92	4,134	
Vincent's angina	503	1,158		3	1,664	
Streptococcus	40				40	5,838
Malaria						
Tertian	7	3,057		30	3,094	3,094
Agglutination Tests						
Typhoid						
"H" Agglutinins	50	1,344	49	97	1,540	
Paratyphoid A	5	692	6		703	
Paratyphoid B	2	694	7		703	
Weil-Felix	97	612	30		739	
Brucella abortus	18	635	3		656	
P. Tularense	1	272	3		276	4,617
Cultures						
Stool and Urine						
Typhoid	12	1,389		14	1,415	
Salmonella	3				3	1,418
Stool						
Bacillary Dysentery	4	3			7	7
Tuberculosis						
Microscopic						
Acid-fast stain	116	1,978		22	2,116	2,116
Venereal Diseases						
Gonorrhea						
Smears	1,683	12,436		82	14,201	
Cultures	629	1,335		2	1,966	
Ophthalmia	12	93		4	109	16,276
Syphilis						
Kahn						
Blood						
Qualitative	17,829	89,997	2,802	724	111,352	
Quantitative	847				847	
Verification test	266				266	112,465
Spinal fluid						
Qualitative	168	1,315	15	5	1,503	
Quantitative	133				133	1,636
Eagle						
Blood						
Qualitative	19,393	88,698	1,915	855	110,861	110,861
Mazzini						
Blood						
Qualitative	3,596	3,673	1,097	1,018	9,384	9,384
Darkfield		12		3	15	15
Rabies						
Dogs		17			17	
Cats		7		1	8	
Other animals		4			4	29
Miscellaneous						
Smears		120			120	
Cultures		9			9	129

PHOTOELECTRIC COLORIMETRIC DETERMINATIONS:		
Hemoglobin	129	
Protein cerebrospinal fluid	1,503	1,632

	No. Samples Examined	Total Number Tests Made	
WATER			
Bacteriological	963	1,956	1,956
MILK PRODUCTS			
Milk	1,135	3,271	
Cream	10	18	
Ice Cream	111	201	
Chocolate milk	2	4	3,494
TOTAL			295,575

TABLE 6.—REPORT OF TAMPA LABORATORY BY MONTHS, 1943.

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
INTESTINAL PARASITES															
Hookworm:	Pos.	287	243	342	463	275	287	232	170	260	386	619	514	4,078	
	Neg.	1,407	1,581	1,823	1,637	1,818	1,121	634	542	781	1,321	1,746	1,626	16,037	
	Unsat.	7	1		1		2			2	3	3	4	23	
Ascaris		18	15	34	13	18	9	8	4	9	22	33	26	209	
Oxyuris		2	3	7	11	6	1		1	3		6	12	52	
Tapeworm		1		2	3	1					6	5		18	
Trichuris		24	29	66	18	24	10	2	1	1	3	6	7	191	20,608
THROAT SPECIMENS															
Diphtheria:	Pos.	3	1	6	2	2				3	5	21	3	46	
	Neg.	336	350	350	305	336	234	172	185	467	463	524	274	3,996	
	Unsat.		1			2	19	2	17	23	18	10		92	4,134
Vincent's Angina:	Pos.	58	60	74	49	55	55	34	17	28	21	24	28	503	
	Neg.	146	154	162	190	103	77	71	67	58	54	36	40	1,158	
	Unsat.						1		1		1			3	1,664
Streptococcus:	Pos.					8	32							40	40
MALARIA:	Pos.		1		1	1					1	2	1	7	
	Neg.	72	128	149	71	335	344	275	305	444	368	343	223	3,057	
	Unsat.	1		1		1	1		2	4	8	8	4	30	3,094
AGGLUTINATION TESTS															
Typhoid:	Pos.	1	4			3	6	4	9	11	7	3	2	50	
	Neg.	62	70	72	60	86	155	149	201	170	134	105	80	1,344	
	Partial		1	1	1	2	6	6	12	10	8	1	1	49	
	Unsat.	1	2	1			2	11	23	21	19	14	3	97	1,540
Paratyphoid A:	Pos.							1	1	1			2	5	
	Neg.	26	33	31	28	59	80	71	109	92	71	52	40	692	
	Partial		1	1	1						1	2		6	703
Paratyphoid B:	Pos.								1	1				2	
	Neg.	26	33	31	29	59	80	71	108	92	71	52	42	694	
	Partial		1	1				1	1		1	2		7	703
Weil-Felix:	Pos.	8	5	6	1	9	5	6	8	14	16	6	13	97	
	Neg.	22	34	29	30	55	71	71	94	73	56	41	36	612	
	Partial	1	1	2		2	4	4	5	5	4	1	1	30	739
Brucella abortus:	Pos.	1			5	3	1	1	1	1		3	2	18	
	Neg.	27	34	37	30	59	75	70	95	66	62	37	43	635	
	Partial						1				2			3	656

TABLE 6.—REPORT OF TAMPA LABORATORY BY MONTHS, 1943.—(Cont)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
P. Tularense:	Pos.								1					1	
	Neg.	9	16	14	17	32	31	25	33	36	25	19	15	272	
	Partial				2					1				3	276
CULTURES															
Stool & Urine															
Typhoid:	Pos.				1		1	2	1	1	2	1	3	12	
	Neg.	4	8	6	24	51	90	98	105	246	256	303	198	1,389	
	Unsat.							1	1	9	3			14	1,415
Salmonella:	Pos.		3											3	3
Stool Dysentery															
Flexner:	Pos.		2					1	1					4	
	Neg.	1		1							1			3	7
TUBERCULOSIS:	Pos.	8	5	20	8	13	8	6	8	10	13	9	8	116	
	Neg.	101	119	194	158	111	125	134	139	210	232	281	174	1,978	
	Unsat.	2	1	1	3	2		1	2	1	4	4	1	22	2,116
GONORRHEA															
Smears:	Pos.	115	123	129	98	153	122	95	192	172	209	165	110	1,683	
	Neg.	1,026	799	828	849	948	1,045	875	1,062	1,172	1,217	1,384	1,231	12,436	
	Unsat.	4		2				7	13	24	24	4	4	82	14,201
Cultures:	Pos.									43	183	211	192	629	
	Neg.							2	2	189	256	385	501	1,335	
	Unsat.												2	2	1,966
Ophthalmia:	Pos.			1	1	1		2	3	1	1	2		12	
	Neg.	8	2	6	14	5	11	5	6	7	7	9	13	93	
	Unsat.				1			1			1	1		4	109
SYPHILIS															
Kahn															
Blood:															
Qualitative:	Pos.	1,520	1,457	1,668	1,533	1,540	1,669	1,509	1,460	1,444	1,415	1,266	1,348	17,829	
	Neg.	8,677	7,037	7,106	7,068	7,371	7,628	7,124	6,912	7,386	9,121	7,713	6,854	89,997	
	Doubtful	280	211	268	230	236	233	237	258	254	181	182	232	2,802	
	Unsat.	42	27	26	31	32	24	58	41	194	106	88	55	724	11,352
Quantitative:	Pos.	12	10	22	23	84	84	46	52	70	100	91	253	847	847
Verification Test:	Pos.			32	32	18	15	8	7	23	31	32	68	266	266
Spinal fluid:															
Qualitative:	Pos.	8	11	19	7	16	8	16	12	14	19	22	16	168	
	Neg.	110	95	112	86	139	140	126	101	83	115	132	76	1,315	
	Doubtful	2	1				1			2	3	2	4	15	
	Unsat.				1	1	1	2						5	1,503

TABLE 6.—REPORT OF TAMPA LABORATORY BY MONTHS, 1943.—(Cont)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
SYPHILIS															
Spinal fluid:															
Quantitative:	Pos.	8	9	13	5	11	8	12	7	9	18	19	14	133	133
Eagle															
Blood:															
Qualitative:	Pos.	1,685	1,631	1,857	1,666	1,726	1,875	1,676	1,704	1,620	1,419	1,268	1,266	19,393	
	Neg.	8,355	6,796	6,987	6,978	7,210	7,446	6,987	6,743	7,309	9,118	7,758	7,011	88,698	
	Doubtful	194	183	153	161	189	195	170	134	121	140	126	149	1,915	
	Unsat.	241	95	47	26	23	17	39	49	225	64	14	15	855	110,861
Mazzini:	Pos.	377	426	378	269	248	295	360	294	261	328	223	137	3,596	
	Neg.	58	55	80	122	207	296	550	524	640	410	417	314	3,673	
	Doubtful	46	33	91	118	127	113	111	86	101	74	106	91	1,097	
	Unsat.	12	12	11	13	53	106	206	230	239	49	61	26	1,018	9,384
Darkfield:	Neg.	2			4	3	1		1		1			12	
	Unsat.				1	1		1						3	15
RABIES															
Dog:	Neg.		1		4	3	3	1	1		3		1	17	
Cat:	Neg.				2	2	1		1	1				7	
	Unsat.							1						1	
Other animals:	Neg.		2	1						1				4	29
MISCELLANEOUS															
Smears:		7	5	19	13	12	11	8	5	9	13	7	11	120	
Cultures:		2		1	1			1		1	2	1		9	129
Hemoglobin:		14	9	9	9	7	15	9	21	12	16	5	3	129	129
Protein cerebro spinal fluid:		120	107	131	94	156	150	144	113	99	137	156	96	1,503	1,503
WATER															
Bacteriological Examinations:		107	120	102	69	81	244	536	246	175	113	84	79	1,956	1,956
MILK PRODUCTS															
Milk:		269	205	304	320	266	229	349	379	198	262	256	234	3,271	
Cream:					4	1	4	2		5			2	18	
Ice Cream:		8	13	15	24	25	15	22	29	6	14	12	18	201	
Chocolate Milk:								4						4	3,494
TOTAL:		25,971	22,415	23,882	23,039	24,426	24,939	23,466	22,959	25,264	28,838	26,524	23.852	295,575	295,575

TABLE 7.—ANNUAL REPORT OF PENSACOLA LABORATORY FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Intestinal Parasites						
Total No. Specimens Ex.						3,240
Helminths ova					3,235	
Hookworm	911	2,245		31		
Ascaris	25					
Oxyuris	18					
Tapeworm	1					
Trichuris	4					
Protozoan cysts					5	
Endamoeba coli	1					
E. histolytica	1					
Giardia lamblia	3					
Throat Specimens						
Diphtheria						
Cultures	108	403		10	521	
Vincent's angina	150	103			253	
Streptococcus	6	4			10	784
Malaria						
Tertian	10	454		3	467	
Estivo-autumnal	1				1	468
Agglutination Tests						
Typhoid						
"H" Agglutinins	9	344	34	12	399	
Paratyphoid A	2	76	4		82	
Paratyphoid B	3	73	6		82	
Weil-Felix	19	117	3	1	140	
Brucella abortus		115			115	
P. tularense		71			71	889
Tuberculosis						
Microscopic						
Acid-fast stain	137	252		1	390	390
Venereal Diseases						
Gonorrhea						
Smears	444	3,831		64	4,339	
Cultures	308	1,511	147	6	1,972	6,311
Syphilis						
Kahn						
Blood						
Qualitative	3,655	15,229	882	1,318	21,084	
Quantitative	4				4	21,088
Spinal fluid						
Qualitative	40	334		2	376	
Quantitative	6				6	382
Eagle						
Blood						
Qualitative	1,240	5,195	322	64	6,821	6,821
Mazzini						
Blood						
Qualitative	2,583	9,570	836	1,028	14,017	14,017
Darkfield	4	6			10	10
Rabies						
Dogs	1	8			9	
Cats	1				1	
Other Animals		1			1	11
Miscellaneous						
Smears		12			12	12
PHOTOELECTRIC COLORIMETRIC DETERMINATIONS:						
Hemoglobin					316	316

	No. Samples Examined	Total Number Tests Made	
WATER			
Bacteriological	221	854	854
MILK PRODUCTS			
Milk	792	3,734	
Cream	7	19	
Ice Cream	10	17	
Chocolate milk	13	26	
Sterile bottles	1	1	
Miscellaneous	11	13	3,810
TOTAL			59,403

TABLE 8.—REPORT OF PENSACOLA LABORATORY BY MONTHS—1943.

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
INTESTINAL PARASITES														
Hookworm: Pos.	84	197	90	258	42	55	39	30	9	46	50	11	911	
Neg.	185	288	228	425	172	148	189	138	98	151	136	87	2,245	
Unsat.	1		1	5	2	9	3	5	1		4		31	
Ascaris	5	7	3	1	1	1		1		4	2		25	
Oxyuris	2	1	1	1	1	1	3	2	1	3	2		18	
Tapeworm				1									1	
Trichuris	1					2	1						4	3,235
Protozoan Cysts														
Endameba coli										1			1	
E. histolytica										1			1	
Giardia lamblia							1				2		3	5
THROAT SPECIMENS														
Diphtheria: Pos.		1		1			1	5	8	17	61	14	108	
Neg.	8	10	7	8	16	1	5	5	47	29	179	88	403	
Unsat.	1				1	2	1		2	2	1		10	521
Vincent's Angina: Pos.	8	10	14	12	11	6	19	8	11	16	12	23	150	
Neg.	12	16	10	13	11	6	4	4	4	6	6	11	103	253
Streptococcus: Pos.						1		1			4		6	
Neg.	1		1				1	1					4	10
MALARIA: Pos.	1		1		3		1			2	2	1	11	
Neg.	19	26	30	34	54	64	80	56	45	22	17	7	454	
Unsat.	1									2			3	468
AGGLUTINATION TEST														
Typhoid														
"H" Agglutinins: Pos.	3	2	1			1			2				9	
Neg.	13	14	18	36	35	34	48	38	38	27	27	16	344	
Partial			1		17	3		8		3	3		34	
Unsat.						1	2	4	3	1			12	399
Paratyphoid A: Pos.	2												2	
Neg.	4				9	3	10	18	6	11	10	5	76	
Partial					2			2					4	82
Paratyphoid B: Pos.	3												3	
Neg.	3				6	3	10	19	6	11	10	5	73	
Partial					5			1					6	82
Weil-Felix: Pos.	3		2			2	2	4	2	2	2		19	
Neg.	5	6	8	17	13	1	8	17	7	16	13	6	117	
Partial					1			1		1			3	
Unsat.									1				1	140

TABLE 8.—REPORT OF PENSACOLA LABORATORY BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
AGGLUTINATION TESTS															
Typhoid															
Brucella abortus:	Neg.	9	4	8	5	11	3	12	24	9	12	13	5	115	115
P. Tularense:	Neg.	5	4	7	4	8	2	9	15	4	7	4	2	71	71
TUBERCULOSIS															
Microscopic:	Pos.	16	14	15	11	9	15	18	7		16	11	5	137	
	Neg.	32	21	18	22	28	7	29	19	3	39	11	23	252	
	Unsat.										1			1	390
GONORRHEA															
Smears:	Pos.	42	33	16	34	34	29	32	35	29	51	80	29	444	
	Neg.	164	259	274	231	248	101	350	345	413	433	511	502	3,831	
	Unsat.	2	6			11			12	15	4	2	12	64	4,339
CULTURES:	Pos.	23	17	9	10	23	34	17	10	8	38	59	60	308	
	Neg.	50	92	69	52	83	227	52	88	99	189	248	262	1,511	
	Doubtful						54				2	29	62	147	
	Unsat.						6							6	1,972
SYPHILIS															
Kahn															
Blood															
Qualitative:	Pos.	313	378	462	402	328	295	290	155	283	285	260	204	3,655	
	Neg.	1,986	1,889	1,757	1,498	1,221	1,286	1,234	553	1,021	891	1,103	790	15,229	
	Doubtful	50	71	181	97	90	73	91	29	60	67	42	31	882	
	Unsat.	48	110	70	75	139	179	204	140	158	131	38	26	1,318	21,084
Quantitative:	Pos.					4								4	4
Spinal fluid															
Qualitative:	Pos.	3	1	6	2	6		1		8	6	3	4	40	
	Neg.	40	14	40	13	11	6	3	4	73	52	56	22	334	
	Unsat.									1		1		2	376
Qualitative:	Pos.									6				6	6
Eagle															
Blood															
Qualitative:	Pos.	404	418	418										1,240	
	Neg.	1,908	1,668	1,619										5,195	
	Doubtful	123	55	144										322	
	Unsat.	2		62										64	6,821

TABLE 8.—REPORT OF PENSACOLA LABORATORY BY MONTHS—1943.—(Continued)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
SYPHILIS															
Mazzini:	Pos.	1		54	414	331	246	323	160	283	295	285	191	2,583	
	Neg.	3		142	1,484	1,229	1,269	1,246	575	1,036	899	968	719	9,570	
	Doubtful			20	120	90	101	91	29	60	56	153	116	836	
	Unsat.			11	54	145	217	159	113	143	124	37	25	1,028	14,017
Darkfield:	Pos.	4												4	
	Neg.	5				1								6	10
RABIES															
Dog:	Pos.												1	1	
	Neg.			1	1	2	1	1	2					8	
Cat:	Pos.							1						1	
Other animals:	Neg.				1									1	11
HEMOGLOBIN		34	14	20	18	21	51	31	22	22	22	27	34	316	316
MISCELLANEOUS		2	3			1		1	1			2	2	12	12
WATER															
Bacteriological:		32	8	14	22	20	90	112	154	260	66	28	48	854	854
MILK PRODUCTS															
Milk:		627	230	330	165	156	162	320	212	412	335	575	210	3,734	
Cream:		4	8	2			1	2				2		19	
Ice Cream:				3			1	8	4		1			17	
Chocolate Milk:		10	2	4		1	2	3		4				26	
Miscellaneous:						2	1	2		8	1			14	3,810
TOTAL		6,307	5,897	6,192	5,547	4,655	4,803	5,070	3,076	4,709	4,397	5,091	3,659	59,403	59,403

TABLE 9.—ANNUAL REPORT OF MIAMI LABORATORY FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Intestinal Parasites						
Total No. Specimens Ex.						1,613
Helminths ova					1,465	
Hookworm	102	1,232		14		
Ascaris	38					
Oxyuris	41					
Tapeworm	18					
Trichuris	17					
Strongyloides	3					
Protozoan cysts					148	
Endamoeba coli	49					
Chilomastix mesnili	17					
Giardia lamblia	82					
Throat Specimens						
Diphtheria						
Cultures	15	1,056	2	2	1,075	
Vincent's angina	111	46		5	162	
Streptococcus	2	8			10	1,247
Malaria						
Tertian		1,015		3	1,018	
Untyped	1	1			1	1,019
Agglutination Tests						
Typhoid						
"H" Agglutinins	126	846	52		1,024	
"O" Agglutinins	43	944	37		1,024	
Paratyphoid A	33	498	30		561	
Paratyphoid B	31	502	27		560	
Weil-Felix	24	486	16		526	
Brucella abortus	23	746	9	47	825	
P. tularense	2	415			417	4,937
Cultures						
Blood						
Typhoid		9		4	13	
Brucella		3			3	16
Stool and Urine						
Typhoid	2	766		18	786	
Salmonella	10				10	796
Stool						
Bacillary Dysentery	4	188		2	194	194
Tuberculosis						
Microscopic						
Acid-fast stain	328	1,119		60		1,507
Venereal Diseases						
Gonorrhea						
Smears	1,183	7,483	1,485	86	10,237	
Cultures	1,403	3,574		96	5,073	15,310
Syphilis						
Kahn						
Blood						
Qualitative	21,464	78,376	3,600	3,810	107,250	
Quantitative	757	11			768	108,018
Spinal fluid						
Qualitative	136	940			1,076	
Quantitative	68	6			74	1,150
Eagle						
Blood						
Qualitative	11,501	52,191	7,157	724	71,573	71,573
Mazzini						
Blood						
Qualitative	1,026	2,731	1,315		5,072	5,072
Darkfield	28	56	1	7	92	92
Rabies						
Dogs	2	21		1	24	
Cats		4			4	
Other animals		1			1	29
Miscellaneous						
Smears	35	80		3	118	
Cultures	10	39			40	158
PHOTOELECTRIC COLORIMETRIC DETERMINATIONS:						
Hemoglobin					44	
Protein cerebrospinal fluid					526	570

TABLE 9.—ANNUAL REPORT OF MIAMI LABORATORY FOR YEAR 1943
(Continued)

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
			No. Samples Examined		Total Number Tests Made	
WATER						
Bacteriological			3,885		8,242	8,242
Chemical						
Water			297		297	297
MILK PRODUCTS						
Milk			2,525		8,864	
Cream			419		1,296	
Ice Cream			384		1,033	
Chocolate milk			193		558	
Cryoscope			128		128	
Sterile bottles			239		266	12,145
MISCELLANEOUS						
Meat reconstruction			6		6	
Rim test on drinking glasses			4,275		5,566	5,572
TOTAL						239,557

TABLE 10.—REPORT OF MIAMI LABORATORY BY MONTHS, 1943

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
INTESTINAL PARASITES															
Hookworm:	Pos.	16	7	7	23	9	17	3			1	3	16	102	
	Neg.	99	72	77	117	93	105	85	104	145	143	114	78	1,232	
	Unsat.	1						4	1	5	2		1	14	
Ascaris			3		6	1	1	4	6	7	3	4	3	38	
Oxyuris		1	1	5	2	2	3	6		7	5	5	4	41	
Tapeworm		2	2			3	1	2	6				2	18	
Trichuris		2	2	5		1		3	3	1				17	
Strongyloides			1	1						1				3	
Protozoan Cysts															
Endameba coli		12	2	6	9	10	8	2						49	
Chilomastix mesnili		2	2	1	4		1	1		2		3	1	17	
Giardia lamblia		5	4	9	10	10	15	8	8	2	1	9	1	82	1,613
THROAT SPECIMENS															
Diphtheria:	Pos.			4	3	1							7	15	
	Neg.	19	20	175	119	104	97	72	46	119	60	116	111	1,058	
	Unsat.									2				2	1,075
Vincent's Angina:	Pos.	15	12	26	7	6	4	7	7	7	7	7	6	111	
	Neg.	1	3	4	2	4	6	2	4	7	4	5	4	46	
	Unsat.										1		4	5	162
Streptococcus:	Pos.	1	1											2	
	Neg.	2	1	1	2		1	1						8	10
MALARIA:	Pos.										1			1	
	Neg.	56	25	45	45	44	57	72	57	51	65	176	322	1,015	
	Unsat.		1			2								3	1,019
AGGLUTINATION TESTS															
Typhoid															
"H" Agglutinins:	Pos.	13	14	9	7	3	4	1	15	13	23	14	10	126	
	Neg.	70	49	73	59	70	89	91	117	79	66	39	44	846	
	Partial	12	1	8	7	8	1	8	5		1	1		52	1,024
"O" Agglutinins:	Pos.	3	4	2	4	3	1		11	4	4	6	1	43	
	Neg.	89	56	84	68	77	91	97	120	88	78	45	51	944	
	Partial	3	4	4	1	1	2	3	6		8	3	2	37	1,024
Paratyphoid A:	Pos.	7	4	7	3		1		6	2	1	1	1	33	
	Neg.	38	33	31	32	38	55	47	82	47	39	22	34	498	
	Partial	6	4	3	2	3	3	2	3		1	2	1	30	561

TABLE 10.—REPORT OF MIAMI LABORATORY BY MONTHS, 1943.—(Cont)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
AGGLUTINATION TESTS															
Typhoid															
Paratyphoid B:	Pos.		4	9	4	2		1	3	3	2	2	1	31	
	Neg.	43	31	28	31	39	56	48	85	46	39	22	34	502	
	Partial	6	6	4	2		3		4			1	1	27	560
Weil-Felix:	Pos.			4	1			3	6	7	1	1	1	24	
	Neg.	24	28	29	35	40	54	46	76	47	44	25	38	486	
	Partial			1			1	4	2	4	1	2	1	16	526
Brucella abortus:	Pos.	1		1	2	4		3	3	1	2	3	3	23	
	Neg.	35	47	49	67	66	77	77	91	65	72	40	60	746	
	Partial	2	2		1	2			1			1		9	
	Unsat.	6			3	3	5	3	7	11	2	3	4	47	825
P. Tularense:	Pos.								1	1				2	
	Neg.	23	26	22	29	34	36	41	64	42	37	20	41	415	417
CULTURES															
Blood															
Typhoid:	Neg.		1		1		1	5				1		9	
	Unsat.						4							4	
Brucella:	Neg.					1		2						3	16
Stool & Urine															
Typhoid:	Pos.									1			1	2	
	Neg.	13	15	64	81	84	44	48	37	41	63	93	183	766	
	Unsat.			3	3	4		1	1	1	2	2	1	18	
Salmonella:													10	10	796
Stool:															
Bacillary Dys.	Pos.										4			4	
	Neg.										186	1	1	188	
	Unsat.										2			2	194
TUBERCULOSIS:	Pos.	30	21	47	66	32	17	33	25	17	24	12	4	328	
	Neg.	89	48	140	170	107	71	71	65	63	70	105	120	1,119	
	Unsat.	1	1	8	3	6	1	10	4	5	5	8	8	60	1,507
GONORRHEA:															
Smears:	Pos.	135	122	115	75	75	97	109	98	107	86	77	87	1,183	
	Neg.	655	659	699	714	650	792	618	756	898	879	874	774	8,968	
	Unsat.	13	4	2	2	2	25	14	14	1	7	2		86	10,237
Cultures:	Pos.		59	118	105	103		85	128	143	198	224	240	1,403	
	Neg.		121	253	237	328		276	316	510	558	491	484	3,574	
	Unsat.					1		11	2	34	27	11	10	96	5,073

TABLE 10.—REPORT OF MIAMI LABORATORY BY MONTHS, 1943.—(Cont)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
SYPHILIS															
Kahn															
Blood															
Qualitative:	Pos.	2,210	1,851	2,300	1,951	1,658	1,856	1,976	1,431	1,304	1,514	1,741	1,672	21,464	
	Neg.	6,434	5,835	7,538	6,739	6,043	7,177	6,595	5,901	6,086	7,169	6,824	6,035	78,376	
	Doubtful	402	271	343	326	197	246	290	292	280	305	331	317	3,600	
	Unsat.	200	197	287	272	479	505	328	348	430	298	275	191	3,810	107,250
Quantitative:	Pos.	69	50	47	50	38	17	37	21	4	57	160	207	757	
	Neg.									11				11	768
Spinal fluid															
Qualitative:	Pos.	8	13	9	5	7	7	1	22	14	16	19	15	136	
	Neg.	60	35	46	40	55	68	46	138	125	133	97	97	940	1,076
Quantitative:	Pos.	2	2	3	3	7	3		18	3	9	10	8	68	
	Neg.									6				6	74
Eagle															
Blood															
Qualitative:	Pos.			947	1,450	1,300	1,465	1,446	913	777	1,084	1,085	1,034	11,501	
	Neg.			2,380	5,718	5,204	6,199	5,525	5,114	5,118	6,074	5,788	5,071	52,191	
	Doubtful			418	920	512	736	800	776	873	628	789	705	7,157	
	Unsat.			33	26	105	119	79	88	131	43	57	43	724	71,573
Mazzini:	Pos.	241	173	171	37	28	25	39	42	79	48	49	94	1,026	
	Neg.	202	343	280	180	122	156	206	196	344	204	255	243	2,731	
	Doubtful	311	290	177	66	152	39	65	56	80	28	51	100	1,315	5,072
Darkfield:	Pos.	1	6	6	3	2		1	2	2	2	1	2	28	
	Neg.	2	5	12	10	9	4	2	1	3	3	1	4	56	
	Doubtful					1								1	
	Unsat.	2	1		1	1		2						7	92
RABIES															
Dog:	Pos.	1										1		2	
	Neg.	3	2	4	4	1	1	3	2			2		22	
Cat:	Neg.							1			2	1		4	
Other Animals:	Neg.							1						1	29
MISCELLANEOUS															
Smears:		80	6	12	10			1	5	3		4	3	124	
Cultures		18	1	1		3	1		2		4	10		40	164
Swab tests on drinking glasses		740	886	936	494	458	18	394	387	343	197	295	418	5,566	5,566

TABLE 10.—REPORT OF MIAMI LABORATORY BY MONTHS, 1943.—(Cont)

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
HEMOGLOBIN				10	6	8	9	4	5	2			44	44
PROTEIN-Spinal fluid				29	28	35	17	111	85	96	55	70	526	526
WATER														
Bacteriological:	843	476	584	562	561	656	1,014	933	807	681	572	553	8,242	8,242
Chemical:		32	33	77	15			31	14	42	38	15	297	297
MILK PRODUCTS														
Milk:	785	789	1,058	644	800	737	642	684	605	824	612	684	8,864	
Cream:	123	168	132	120	87	90	90	93	78	108	111	96	1,296	
Ice Cream:	56	60	62	60	33	87	93	138	105	117	108	114	1,033	
Chocolate milk:	36	42	48	51	56	30	55	57	33	60	45	45	558	
Cryoscope:			24	59	21					12	5	7	128	
Miscellaneous	14	39	26	54	25	20	5	14	16	16	17	20	266	12,145
TOTAL	14,394	13,096	20,100	22,135	19,990	22,152	21,793	20,216	20,401	22,601	22,005	20,674	239,557	239,557

TABLE 11.—ANNUAL REPORT OF TALLAHASSEE LABORATORY FOR YEAR 1943

	Positive	Negative	Doubtful	Unsat.	TOTAL	Grand Total
Intestinal Parasites						
Total No. Specimens Ex.						
Helminths ova						1,108
Hookworm	172	921		6	1,108	
Ascaris	4					
Oxyuris	3					
Tapeworm	1					
Trichuris	1					
Throat Specimens						
Diphtheria						
Cultures	5	179		5	189	
Vincent's angina	34	45			79	
Streptococcus		6			6	274
Malaria						
Tertian	1	1,205		2	1,208	1,208
Agglutination Tests						
Typhoid						
"H" Agglutinins	10	131	3	1	145	
Paratyphoid A	2	56	2		60	
Paratyphoid B	2	58			60	
Weil-Felix	11	65			76	
Brucella abortus	4	93			97	
P. Tularense		22			22	460
Cultures						
Stool						
Bacillary Dysentery		11			11	11
Tuberculosis						
Microscopic						
Acid-fast stain	2	102			104	104
Venereal Diseases						
Gonorrhea						
Smears	487	5,780		46	6,313	
Cultures	498	1,205			1,703	
Ophthalmia	1	8			9	8,025
Syphilis						
Kahn						
Blood						
Qualitative	866	4,273	220	35	5,394	
Quantitative	344				344	5,738
Mazzini						
Blood						
Qualitative	1,078	4,014	244	21	5,357	5,357
Darkfield	4	13	1	2	20	20
Miscellaneous						
Smears		1			1	1
PHOTOELECTRIC COLORIMETRIC DETERMINATIONS:						
Hemoglobin					435	435

	No. Samples Examined	Total Number Tests Made	
WATER			
Bacteriological	370	1,053	1,053
MILK PRODUCTS			
Milk	283	1,306	
Cream	1	1	
Sterile bottles	4	8	1,315
TOTAL			25,109

TABLE 12.—REPORT OF TALLAHASSEE LABORATORY BY MONTHS— 1943.

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
INTESTINAL PARASITES															
Hookworm:	Pos.	25	8		12	27	11	23	15	19	14	4	14	172	
	Neg.	85	25		56	115	75	124	78	85	153	72	53	921	
	Unsat.		2			4								6	
Ascaris					1			2		1				4	
Oxyuris			1					1		1				3	
Tapeworm									1					1	
Trichuris						1								1	1,108
THROAT SPECIMENS															
Diphtheria:	Pos.											5		5	
	Neg.	25	12		19	7	11	12	15	18	8	40	12	179	
	Unsat.		5											5	189
Vincent's Angina:	Pos.	6	4		7	2	4		1	4	2	2	2	34	
	Neg.	8	5		1	4	5	5	1	2	7	4	3	45	79
Streptococcus:	Neg.	1						3					2	6	6
MALARIA:	Pos.						1							1	
	Neg.	64	29		106	120	113	202	226	171	66	77	31	1,205	
	Unsat.					2								2	1,208
AGGLUTINATION TEST															
Typhoid:	Pos.	1					1		2	1		4	1	10	
	Neg.	10		5	4	13	10	14	22	16	12	16	9	131	
	Partial	1		1	1									3	
	Unsat.								1					1	145
Paratyphoid A:	Pos.						1	1						2	
	Neg.	3		3	4	9	4	5	7	5	4	9	3	56	
	Partial	2												2	60
Paratyphoid B:	Pos.	1						1						2	
	Neg.	4		3	4	9	5	5	7	5	4	9	3	58	
Weil-Felix:	Pos.	1		1				1	3	2		2	1	11	
	Neg.	4		2	1	13	5	6	8	7	6	8	5	65	76
Brucella abortus:	Pos.					1	2					1		4	
	Neg.	7	4	3	10	16	6	7	8	9	5	11	7	93	97
P. Tularense:	Neg.	1		3		3			1	5	2	4	3	22	22
CULTURES															
Stool															
Bacillary Dysentery:	Neg.	8				3								11	11

TABLE 12.—REPORT OF TALLAHASSEE LABORATORY BY MONTHS—1943.—(Cont)

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Grand Total
TUBERCULOSIS:															
Microscopic:	Pos.				1	1								2	
	Neg.	29	29		31	13								102	104
GONORRHEA															
Smear:	Pos.	44	11	1	59	49	47	45	67	50	42	34	38	487	
	Neg.	673	330	3	708	669	416	487	573	567	625	444	285	5,780	
	Unsat.					9	14	8	4	5		4	2	46	6,313
Culture:	Pos.				22	38	19	35	47	117	45	111	64	498	
	Neg.				49	140	120	161	124	227	90	153	141	1,205	1,703
OPHTHALMIA:	Pos.					1								1	
	Neg.							1	2	1	3	1		8	9
SYPHILIS															
Kahn															
Blood															
Qualitative:	Pos.	230	160	337	139									866	
	Neg.	1,385	827	1,446	603	12								4,273	
	Doubtful	39	44	61	76									220	
	Unsat.	14	12	9										35	5,394
Quantitative:	Pos.	60	25	121	138									344	344
Mazzini:	Pos.	267	198	426	187									1,078	
	Neg.	1,312	816	1,320	554	12								4,014	
	Doubtful	80	21	103	40									244	
	Unsat.	9	8	4										21	5,357
Darkfield:	Pos.					4								4	
	Neg.					13								13	
	Doubtful					1								1	
	Unsat.					2								2	20
HEMOGLOBIN		70	49	41	36	37	55	41	37	23	24	12	10	435	435
MISCELLANEOUS			1											1	1
WATER															
Bacteriological:		90	117	72	30	248	90	94	172	48	30	50	12	1,053	1,053
MILK PRODUCTS															
Milk:		81	12	183	20	200	100	205	145	160		55	145	1,306	
Cream:		1												1	
Miscellaneous				8										8	1,315
TOTAL		4,641	2,755	4,156	2,919	1,798	1,115	1,489	1,567	1,549	1,142	1,132	846	25,109	25,109

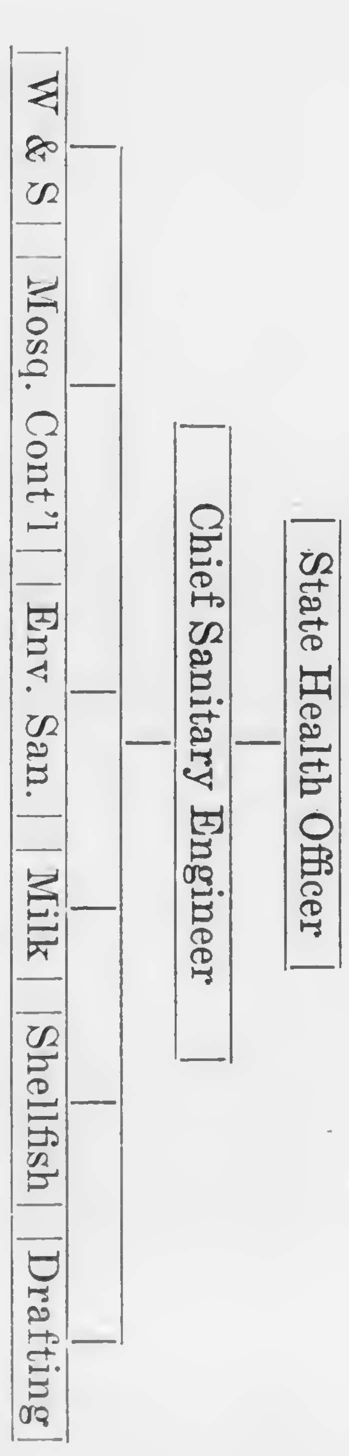
SANITARY ENGINEERING

J. B. MILLER, Acting Director

ADMINISTRATION

During the year of 1943 the Bureau of Sanitary Engineering continued to function under the direction of Mr. J. B. Miller, Acting Director. In this second year of the present war a great many pressing matters arose which had to receive the attention of this organization. Many of these details could only be given slight attention because of the very acute shortage of personnel which has continued as a result of the war emergency. The divisions of the Bureau continued as follows:

Administrative Division
Water and Sewerage Division
Mosquito Control Division
Environmental Sanitation Division
Milk Sanitation Division
Seafood Division
Drafting Division



Although, of course, efforts have been continued through the Merit System and through personal contact to fill several vacancies in field personnel of the Bureau, such efforts have been unsuccessful because of existing circumstances relative to such possibility. Furthermore, it is probable that some more of the members of the personnel still retained will be drafted into the Armed Forces, with very slight chances for making replacements if these circumstances continue. The personnel of the Bureau at the close of the year was comprised of the following:

1 — **Acting Director and Chief Sanitary Engineer**
1 — **Associate Sanitary Engineer**
1 — **Assistant Sanitary Engineer**
1 — **Technical Sanitarian and Sanitation Consultant**
1 — **Milk Sanitation Consultant**
1 — **Seafood Sanitarian**
2 — **Sanitary Officers**
1 — **Draftsman**
1 — **Secretary**
3 — **Stenographers**
1 — **Typist-File Clerk**

Since much of the State now consists of military and naval and war-industry concentration areas, the efforts of the Bureau have continued to be directed toward handling the many problems involving sanitation and public health engineering which have arisen in such areas. The Office of District 4, United States Public Health Service, New Orleans, has, since the war-emergency commenced, assigned personnel to the State in connection with the war effort. Included in the assignment to Florida have been sanitation and engineering personnel attached to this Bureau, which have been a very important supplement to effort in the military and naval concentration areas. The co-operation of the New Orleans office of the Service in this matter is greatly appreciated. At the end of 1943 the Service engineers and sanitarians assigned with the Bureau and in these areas were as follows:

1 — Assistant Sanitary Engineer
3 — Assistant Sanitarians

STATE SANITARY CODE

One of the most important sections of the Florida State Sanitary Code was designed and worked out during the latter part of the year. This is the portion of the Code covering sanitation of school lunchrooms and cafeterias and has been designated Section 25, Chapter XXV thereof. The enabling act making the Code possible provides that rules and regulations pertaining to school sanitation shall be promulgated jointly by the State Department of Education and the State Board of Health. Accordingly, the school lunchroom regulations, including inspection report forms, mechanics of handling, et cetera, were devised in close co-operation with the State Department of Education.

In co-operation with the Bureau of Local Health Service, several of the sanitation inspection report and recording forms utilized in administration of certain chapters of the Sanitary Code were revised or combined.

CONVENTIONS AND STATE TECHNICAL ORGANIZATIONS

The Acting Chief Sanitary Engineer and the Principal Assistant Sanitary Engineer attended the annual meeting of the Federation of Sewage Works Association held in Chicago, Illinois, during October. The particular interest to the Bureau of Sanitary Engineering was the national opinion on post-war planning and the technical discussions on the design and operation of sewage treatment plants.

One of the most successful short schools in water and sewage treatment was held in West Palm Beach during May. The Bureau

of Sanitary Engineering was a co-sponsor of this school, and most of its members gave lectures and instructions. The primary purpose of this school was to instruct the operators of water and sewage treatment plants of Army and Navy Bases, as well as those from municipalities, in basic fundamentals. Approximately two hundred persons attended the school; by far the largest attendance on record.

The Florida Section of the American Water Works Association meeting during November at Fort Lauderdale, was attended by all the field personnel of the Bureau of Sanitary Engineering. Technical papers were presented by several members of the office. An engineer of the Bureau of Sanitary Engineering was elected chairman for the coming year and received the George Warren Fuller Award for outstanding service in the water works field.

Because of the great need for standards in sewage treatment applicable to Florida alone, a standing Research Committee of the Florida Sewage Works Association was promulgated. Two engineers of the Bureau of Sanitary Engineering are on this Committee. The standing Research Committee and the Bureau of Sanitary Engineering are working very closely on the Engineering Experimental Station at the University of Florida, which has just recently been started.

Other meetings attended by engineers of this office were the Florida Engineering Society, the Florida Sewage Works Association and the Florida League of Municipalities.

PUBLIC WATER SUPPLY

In the sanitary control of public water supplies in the State normal routine checks were carried out. The majority of effort, however, was spent on assuring that all communities having a heavy war impact had sufficient and potable drinking water.

Insofar as extensions and other improvements to water supply and distribution systems are concerned, the Federal Works Agency, under the terms of the Lanham Act, gave financial aid to several cities in order that their water supplies might be enlarged or improved as needed. In this connection, the Bureau gave active assistance in co-operation with that agency.

Several small public water supplies were developed for housing projects within the scope of the program of the Federal Housing Administration and plans and specifications for these supplies were reviewed and approved by this office.

Listed in Table No. 1 are the water works improvements for which plans and specifications were submitted during the year to this Bureau for review and approval.

The Bureau of Sanitary Engineering continued during the year to give technical advice when requested by the Army authorities and the Navy authorities on the matter of water supplies.

The policy of the Bureau in requiring chlorination on all new water supplies was continued and efforts were made to have more of the existing supplies, which have still not provided chlorination, to add this very important factor of safety. In direct connection with the war effort insofar as safeguarding water supplies is concerned, considerable time was spent with the Internal Security Division of the U. S. Public Health Service in its phase of this work. Also complete surveys were made of the public water supplies and distribution systems of the cities of Orlando and Key West. Each of these surveys necessarily extended over a period of several weeks and this work was done with the very able assistance of the Bacterial Trailer Laboratory and its personnel from the District No. 4 Office of the U. S. Public Health Service.

Work done on public water supplies and semi-public water supplies during the year included the certification of watering points used by common carriers in interstate traffic. These watering points are certified through the Office of District No. 4 of the U. S. Public Health Service, and 101 of them recommended to the Service for certification. Particular attention was directed toward such watering points serving troop-carrying trains and other carriers important to the war effort. Where physical improvements in these watering facilities were indicated, follow-up inspections, of course, were necessary.

PUBLIC SEWERAGE SYSTEMS AND SEWAGE TREATMENT

Nearly all of the sewerage improvements made during 1943 were under the sponsorship of some governmental agency, usually the Federal Works Agency as a part of the program financed through the Lanham Act for making improvements where a war necessity was shown. Plans were set in motion for making an extensive survey of all sewerage systems in the State in order that more complete action may be taken. Table No. 2 of this report indicates those sewerage and sewage treatment projects which were submitted to this Bureau for review and approval.

TABLE 1.—WATER SUPPLY CONSTRUCTION—1943

LOCATION	Construction Status		Source Water			Method of Sterilization		Lab. Control		Dist. System	Storage	
			Wells									
	New	Addition	Deep	Shallow	Surface	Chlorine	Hypochl.	Chemical	Bact.		Elevated	Ground
Sanford		x	x			x						
Miami										x		
Cross City	x		x				x	x		x	x	x
Lynn Haven (preliminary)		x	x			x						
Panama City (St. Andrews)		x	x			x					x	
Copeland (preliminary)	x		x			x				x	x	
Panama City (Milleville)		x		x		x		x	x			
Carrabelle	x		x			x				x		x
Apalachicola (preliminary)		x				x						
Cedar Key (preliminary)		x		x		x				x		

TABLE 2.—SEWERAGE CONSTRUCTION—1943

LOCATION	Sedimentation			Filters			Chlorination	Lab. Control	Construction		Design Capacity Population	Separate Sludge Digestion	Percent Completed	Construction Agency	Collection System	Sludge Drying Beds
	Primary	Secondary	Activated Sludge	High Capacity	Low Capacity	Sand			New	Addition						
Key West Hospital	Imhoff						x	x	x		200			FWA	x	x
Daytona Beach (preliminary)	Circular	Chem. Precipitation					x	x	x		25,000	x		FWA		x
Panama City	Rect.						x	x	x		20,000	x	100	FWA		x
Carrabelle (preliminary)	Imhoff						x	x	x		2000			FWA	x	x
Marianna	Rect.						x	x		x	8000	*	20	FWA		x
Orlando															x	
Copeland	Septic					x					500			Private	x	
Miami (Industry)	x	x	x				x	x	x		2000	x	25	DPC	x	x
Apalachicola (preliminary)										x				FWA	x	x
Cedar Key									x					FWA	x	
Winter Haven (preliminary)	Circular						x	x	x		6000	x		FWA	x	x
Leesburg (preliminary)		Rectangular						x		x		x		FWA	x	x

*Converted Imhoff

With regard to operation of sewage treatment plants, the effort of the Bureau was directed largely toward areas or communities where a heavier war impact was imposed. In this connection, and at the request of the Chief Public Works Officers of the Navy Air Operational Training Command in Florida, a study was made of the sewage treatment plants serving six bases in the Command. Five of these six sewage treatments plants are of the activated sludge type and the sixth is of the Imhoff tank type. Engineers from the Bureau made specific recommendations for the operation of these plants from an engineering viewpoint. The Trailer Laboratory of District No. 4 of the Public Health Service, assigned to work in Florida in war areas with this Bureau, spent approximately two weeks at each of these bases, instructing the operators in laboratory control testing necessary for good operation of the sewage treatment plants.

Sanitary supervision of sewage treatment and disposal works of the municipalities was continued during the year to the extent permitted by the shortage of engineering personnel resulting from the war emergency.

POST-WAR PLANNING FOR WATER AND SEWERAGE

Late in the year, the Bureau was asked to represent in Florida the committee comprising representatives of the American Water Works Association, the Federation of Sewage Works Associations, the New England Water Works Association and the Water and Sewage Works Manufacturers Association in the movement to advance to the blue-print stage, as soon as possible, plans for very much needed water works and sewage improvements.

The Bureau feels that every community in Florida with proper management of water and sewerage utilities is entitled to and is able to pay for adequate water and sewerage systems, including necessary treatment of water and sewage. The efforts of the Bureau have been centered on getting community officials to place in the upper bracket of construction projects, which have been deferred because of scarcity of labor and materials, plans for badly needed water supply and sewerage system improvements. Officials of municipalities have been urged to consider not only the technical details of supply, treatment and distribution of water and the layout of collector networks, treatment and disposal of sewage, but to give careful consideration to the financial structure involved in such water and sewerage improvement programs.

Results of the efforts of the Bureau in connection with post-war planning for water and sewerage have been gratifying and good response had been received from several communities already.

INDUSTRIAL WASTE

The most extensive problem facing the Bureau in the field of industrial waste treatment and disposal during 1943 was that of the citrus industry. An excellent step forward in solving this problem was the employment by the Florida Citrus Commission of a Research Fellow to work on the treatment and disposal of citrus waste with the thought of developing a by-product or by-products which might partially pay for treatment processes. This Bureau gave active assistance to that agency and is continuing parallel research on the problem. The outlook for a solution to the problem at the end of the year appeared favorable and through co-ordinated efforts much more progress should be made during the ensuing year.

Numerous canneries are discharging wastes into adjacent bodies of water or into lagoons. With the advent of warm weather putrescible mats form on the surface which are excellent media for fly breeding. This problem has been intensified because of expansion of the canning industry.

TIDAL WATER AND STREAM POLLUTION

Considerable work was done during the year on stream and tidal water sanitation. Much of this work became necessary as a result of concentrations of military personnel and war industry activities at several locations in the State. To assist with this particular feature of pollution investigations, the Office of District No. 4 of the U. S. Public Health Service assigned a Mobile Trailer Laboratory and personnel to work with the Bureau. The principal concern was the pollution of commercial oyster beds by increased sewage flow. During 1943, the following areas were surveyed both from a bacteriological viewpoint and from a physical viewpoint, including the location of the pollution source contributing to the area, movement and exchange of waters:

1. **Spring Creek**—A complete sanitary and bacterial survey, resulting in certain areas closed in Spring Creek.
2. **Caloosahatchee River**—A complete sanitary and bacterial survey of the waters with the conclusion that the area at the mouth of the Caloosahatchee River is safe for the gathering of shellfish. Recommendations were made to the adjacent city regarding such activity.
3. **Halifax River**—A complete sanitary, bacterial and hydrographic survey of the River was made. Information obtained indicated necessity of closing of oyster beds or extension of closed area in these tidal waters adjacent to Port Orange.

4. **Key West**—A complete sanitary and bacterial survey of the waters adjacent to Key West was made. Conclusions reached resulted in condemning certain areas for swimming until necessary improvements in sewage treatment have been made.
5. **St. Andrews Bay**—A complete sanitary and bacterial survey of the North Bay area of St. Andrews Bay was made. Information obtained resulted in condemning certain of the waters in this area for the taking of shellfish.
6. **Clearwater Harbor and St. Josephs Sound**—A complete sanitary and bacterial survey of the tidal waters of Clearwater Harbor and St. Josephs Sound between Ozona and Indian Rocks Beach, Pinellas County was made. Information obtained resulted in opening part of these waters for the gathering of scallops. The entire area continues to be condemned for the gathering of other shellfish.
7. **Indian River (Fort Pierce)**—A sanitary and bacterial survey of the tidal waters of the Indian River adjacent to Fort Pierce was made. Information obtained resulted in continuation of condemned area for the gathering of shellfish.

The co-operative working agreement between the Surface Water Division of the U. S. Geological Survey and this Bureau was of considerable benefit to the pollution surveys and studies made, particularly with regard to hydrographic studies, including tidal patterns and such information.

DRAINAGE WELLS

A great deal of educational work was done in order to inform the public of the acute danger of drainage wells, particularly such wells that receive sanitary sewage. The problem of discharging sanitary sewage into drainage wells is without doubt one of the serious public health hazards in the State. The Bureau has continued its efforts to eliminate such practice and although construction of necessary sewage treatment plants to handle the sewage so disposed has been deferred because of the war, it is felt that during the year ground work which has been performed will yield very good results whenever critical materials and labor shortages permit this construction. Definite action has been taken by one of the municipalities involved which has recently employed consulting engineers to make investigations and formulate complete plans for adequately treating the sewage being disposed of in this hazardous manner.

Almost conclusive information about the contamination of a municipal water supply of a community in West Florida resulted in closing suspected drainage wells receiving storm drainage in that community.

One industrial plant in South Florida which was to start discharging industrial pickling waste into drainage wells is eliminating this hazard through construction of treatment works made possible through war industry priority extension.

The Bureau has continued its policy of maintaining at a very minimum the number of permits issued for drilling drainage wells. The number of such permits issued during the year by counties are listed below:

County	No.
Dade	7
Orange	4
Broward	1
Madison	1
Total	13

MOSQUITO CONTROL

Personnel for specific assignment to this feature of the program of the Bureau were not available and such activity was extremely limited during the year. The Bureau continued to co-operate with the Bureau of Malaria Control with regard to certain engineering features of the work carried on in malaria control operations. Some time was spent on the review and supervision of mosquito control operations at one large water impoundment. Reports of some of the established mosquito control districts were received and reviewed. The Bureau shall, of course, continue its efforts to secure qualified personnel in order that its work in connection with mosquito control activities can be resumed in a more comprehensive manner on the very earliest date possible.

ENVIRONMENTAL SANITATION

The activities of this division have been largely directed along those lines which might tend to bring into effect a stabilized, effective program of Environmental Sanitation as well as the continuation of policies which avoid periodic re-issuance of permits for

most of those establishments of which permits are required. These policies are considered necessary due to conditions which limit personnel both in the field and in the central office.

In certain instances another change in policy was found to be effective in regard to establishments falling in the permitted category. In view of the priorities system and the difficulties entailed in obtaining certain equipment, such as water heating, chlorinating and other types of sterilizing equipment, the policy of issuing temporary permits to establishments that had ordered such equipment pending the delivery and installation of same, was adopted. The large number of establishments affected by these conditions was considered ample reason or justification for the adoption of such a policy.

War-Time Training (Sanitation Personnel)

Plans which were made late in the previous year in co-operation with the Extension Divison of the University of Florida for the in-service training under war-time conditions of sanitation personnel, were put into effect. (Outline of the courses in this program is carried below). Enrollment by sanitation personnel for this war-time training program has been rather good considering the continued turnover of such personnel. The Bureau has not been able to meet its obligations with respect to this program as well as has been expected because of the heavy load of work imposed on the fewer technical personnel which were to assist in writing material for the courses for the training program. Improvement of this condition will, of course, hinge on possibility of procuring personnel to fill existing vacancies.

The program was created as a means of supplying greatly needed personnel as replacements for men entering the armed forces and that personnel lost as a result of their entering other employment. There is also an increased demand for such sanitation personnel caused by the influx of population in certain areas of the State and other conditions resulting from the war emergency.

WAR-TIME TRAINING
FOR
SANITATION PERSONNEL
OUTLINE OF COURSES

1. **Epidemiology**: This course will consist of an epidemiological study of all the communicable diseases common in Florida. "Preventive Medicine and Hygiene" by Rosenau would constitute the principal text.

2. **Community Sanitation**: This course will consist of a study of those physical factors affecting environmental sanitation. "Municipal and Rural Sanitation" by Ehlers and Steel will constitute the principal text.

3. **Elementary Design and Construction.** This course will consist of a study of the design and construction of dairy barns, milk houses, oyster shuckling houses, simple house plumbing, septic tanks, sanitary pit privies, household cisterns, and wells, together with a simple sketch of the geology of Florida. Text material for this course will consist of various pamphlets, reference reading and mimeographed material.

4. **Bacteriology**: This course will consist of a study of the classification and characteristics of those bacterial organisms responsible for diseases common to Florida. The text for this course will be selected by the Bacteriologist who conducts this course of study.

5. **Parasitology and Medical Entomology**: This course will consist of a study of those protozoan and helmenthic parasites common to man in Florida; and the entomology of mosquitoes, fleas, the house fly, ticks, bed bugs, lice, etc., together with a study of means for their control. The text material for this course will be selected by person or persons who conduct this course of study.

6. **Food and Sanitation**: This course will consist of a study of foods and the proper sanitary methods for their harvesting, preparation and serving for the protection of the public's health. This course will coordinate previous studies in Bacteriology, Communicable Diseases, Medical Zoology, Methods of Disinfection and Sterilization and Personal Hygiene and Sanitation for the purpose of giving the student a scientific background for intelligent supervision of enforcement of sanitation laws governing restaurants, dairies, canning plants, oyster and crabmeat houses.

7. **Rural Sociology and Economics**: This course will consist of a standard university course of study in the subject as decided upon by the Sociology Department of the University of Florida.

8. **Public Speaking**: This course will consist of a standard university course in public speaking to be arranged by the Speech Department of the University of Florida.

TOURIST AND TRAILER CAMPS

Tourist and Trailer Camps under permit 1942	551
Tourist and Trailer Camps under permit 1943	656

The increase in the number of camps permitted in 1943 over the

number permitted in 1942 is probably due to special effort to inspect all camps to determine changes in management, etc., and to renew lapsed permits, of course, which had not yet been permitted on a permanent basis. It was also noted that a few camps which discontinued operation in the early stages of the emergency re-opened during 1943.

Since tourist camp permits are now issued on a permanent basis subject to revoke for cause, instead of periodically, field sanitarians and county sanitarians have been requested to submit to the central office a complete application from all establishments for which there is no application on file, submitted later than 1941.

FOOD CANNERIES AND PRESERVING PLANTS

Food Canneries and Preserving Plants under permit 1942	106
Food Canneries and Preserving Plants under permit 1943	118

By the end of 1943 there were very few canning plants which had not been issued so-called permanent permits under the new program.

BOTTLED WATER PLANTS

Bottled Water Plant Permits issued 1942	15
Bottled Water Plant Permits issued 1943	23
Bottled Water Plant Permits issued pending (temporary)	14

Bottled water plants are the establishments chiefly affected by the difficulties involved in obtaining proper washing and sterilization equipment under the priorities system. Hence, the practice of issuing temporary permits as mentioned above.

SWIMMING POOLS

Approval of plans and specifications for new swimming pool constructions, as well as control of the sanitation features of swimming pool operation, was placed in the Bureau by the adoption of the Swimming Pool Code by the State Board of Health in 1941.

The Bureau has continued its endeavor to obtain chlorination of all pools within the State. The general attitude of the pool operators has been co-operative but chlorination equipment has required a high priority rating for which most municipal and private pools were unable to qualify. To those pools showing full intent to obtain chlorination equipment as soon as available and filing such intention in writing with this Bureau, and otherwise meeting the sanitary standards of the Code, the Bureau has issued temporary permits.

No plans for new pool construction were approved during 1943. This is attributed to necessary materials control plan of the Government, together with labor shortage. Temporary permits were issued to twenty pools previously installed. So-called permanent permits were continued for twelve installations.

Number of permits in 1941	108
Number of permits in 1942	52
Number of permits in 1943	32

COMMON CARRIER SANITATION

In 1943, over a period of several weeks, a detailed survey was made of all trains leaving and arriving at the Florida East Coast and Seaboard Air Line Railway Stations, Miami; Tampa Union Station, Tampa; Jacksonville Terminal Station, Jacksonville; and the Louisville and Nashville and Frisco Stations, Pensacola, to determine the sanitary condition of toilets in coaches and Pullmans on each train. Samples of water were collected for bacterial analyses from coolers on coaches and Pullmans to determine if the tanks which supply water to the coolers were properly sterilized.

A representative of the Bureau traveled via train to and from the several cities where the railroad stations were located. While enroute, the sanitary condition of the toilets in the coaches and Pullmans was observed and the activities of the porters, maids, and attendants were noted. Also, observations were made in the kitchens of diners.

The survey showed that practically all of the toilet rooms in coaches and in many Pullmans upon entering the stations were insanitary, and the toilet doors were unlocked. In trains leaving the stations, the toilet compartments were clean in most cases and the toilet doors had not been locked by the crew. However, the toilet stools and bowls were still dirty and odors still persisted after attempted cleaning. The porcelain or metal which surrounded the faucet of the coolers was also found to be dirty in most instances. Also, results from bacterial analyses showed that numerous tanks which supply water to the coolers on the coaches and Pullmans were contaminated by bacteria of the coli-aerogenes group.

Recommendations were made to representatives of the several railroad companies involved and favorable replies were received by the Bureau, stating that steps would be taken immediately to make the necessary corrections. It is intended to make a re-survey of the sanitary conditions of coaches and Pullmans during the ensuing year.

CIVILIAN PUBLIC SERVICE SANITATION PROJECT

During the year, the Civilian Public Service health and sanitation project, operating under the technical supervision of this

Bureau, was greatly expanded. New units were opened in Orange and Polk Counties, and the Okaloosa County Unit was moved to Wakulla County in November.

Units were established in Orange and Polk Counties in September at the written request of the Orange and Polk County Boards of Commissioners, the Directors of the respective County Health Units, and with the consent of the Congressman of the Fifth and First Florida Congressional Districts.

The housing for these units and trucks necessary for their work programs were furnished locally. The Bureau purchased and loaned each of these units a quantity of hand tools necessary to the work programs.

By the end of the year the camp complement of the Polk County Unit had grown to twenty-four men; the camp was well established; and a well-organized work program was underway. A work area was established; power machinery was installed; fifty collapsible forms were built for mass-production of the concrete sections of privies; and a complete set of racks and templates was built for the mass-production of the nine wooden portions of each privy. The installation of privies was started before the work area was completed, 166 Polk County homes being provided with sanitary pit privies during the last two months of the year.

Plans were made for increasing the camp complement of the Polk County Unit to thirty-five men, in order that the camp might manufacture its own lumber through a co-operative agreement with a small local saw mill.

The camp complement of the Orange County Unit had grown to twenty-three men by the end of the year. A work area with mass-production facilities was constructed there as in Polk County and 87 Orange County homes had been provided with sanitary pit privies before the end of the year. In addition to the manufacture and installation of sanitary pit privies, facilities for the manufacture of low-cost screened baby beds were established. The first four of these beds manufactured were delivered to the Orange County Health Unit in December.

At the request of Dr. D. H. Turner, Acting Director of the Bureau of Dental Health, one assignee from the Orange County Unit was assigned to the Bureau of Dental Health to act as Dr. Turner's dental assistant. In this capacity this assignee cares for the dental trailer and assists Dr. Turner in his clinical work.

In November, the Crestview Unit moved to Wakulla County and established a camp at Helen Guard Station in Apalachicola National

Forest. This was done through an agreement with the U. S. Forestry Service to share the work program of this Unit between the Forestry Service and the Wakulla-Franklin Health Department. The U. S. Forestry Service granted the State Board of Health a liberal free-use permit for the use of timber in the Apalachicola National Forest for the construction of sanitary pit privies in Wakulla and adjoining counties. Temporary quarters were arranged and storage and garage at Helen Guard Station. A small Diesel-driven saw mill was purchased by the Brethren Service Committee and assembled near a proposed permanent camp site in the National Forest. Logging operations and the manufacture of lumber were started in December. The first lumber to be manufactured is to be used in the construction of more adequate camp quarters. Later, lumber manufactured at this Civilian Public Service Camp operated saw mill is to be used for the mass production of sanitary pit privies for the control of hookworm disease in Wakulla and surrounding counties.

Plans were made for increasing the camp complement of the Wakulla Unit to forty men in order that sufficient labor would be available for the Forestry Service, the logging program, mill operation and the program of constructing and installing sanitary pit privies.

During the ten months of 1943 in which the Civilian Public Service Camp was located in Okaloosa County, the following public health improvements were made in Wakulla and Santa Rosa Counties:

1. 450 homes were provided with sanitary pit privies.
2. 40 wells were drilled and satisfactory pumps installed at homes.
3. 25 homes were mosquito-proofed.
4. 19 homes were provided with approved septic tanks and drain fields.
5. 3 Tuberculosis Burr Cottages were constructed for the isolation of active tuberculosis cases.
6. 54 wire baskets were fabricated for use in the sanitization of eating utensils in public school lunch rooms.

It is felt that the continued use of the Civilian Public Service free labor in hookworm disease control, and in a lesser degree, other features of the health and sanitation program above recited, has been justified during the year. Outlook for the project for the ensuing year appears bright. It is hoped that requests which have been received from local officials for extension of the project to additional counties can be met. This possibility hinges upon assignment of more of this Civilian Public Service labor which has been requested of Washington office of the Selective Service System.

SANITARY MILK CONTROL

One of the principal problems in milk sanitation during the year has been that of ''shipped-in'' milk and milk products. Another, has been that of shortage of labor and milk handling equipment, which, of course, has been because of the war emergency.

During the cooler months, little, if any, difficulty was experienced in receiving into the State market raw milk and cream in good condition that would meet bacterial standards for Grade ''A'' products. This was due in part, of course, to the cool weather but was also because of the fact that at the time the demand for milk was relatively small for these products from outside of the State and they could be obtained readily from inspected sources. With the advent of warmer weather the demand increased phenomenally because of expanded government activity. There was not enough milk from graded sources to supply this demand. Milk and cream from sources which ordinarily supplied condensers and cheese plants were diverted into fluid milk channels. Information received about some of these sources indicated the same to be of relatively low sanitary quality. Some of such information was received officially from health authorities in Minnesota, Wisconsin, New York and Tennessee, states from which milk was shipped. A potential source of milk supply in North Carolina was also investigated by the Bureau but the products were rejected.

It became increasingly difficult to get these relatively low grade products to Florida in good condition in the raw state. The possibility that shippers resorted to ''flashing'' at first and then to out-and-out pasteurization before shipping may have given some apparent improvement to the condition. The shipping problem eased somewhat but high quality products were not consistently received from outside sources. Bacterial counts were excessive and acidity in a number of instances reached or approximated the souring point.

Distributors buying and receiving these lower grade products continued to distribute them in most instances to the public under Grade ''A'' label. This, of course, tends to give the consuming public the wrong impression of the sanitary grade of such milk and may be considered an injustice to the producer-distributor who produces Grade ''A'' milk under nationally accepted standards and who sells only his own product.

In an effort to bring about a fair adjustment of the labeling situation numerous conferences were held with city officials, county officials, other State agencies, and the members of the industry. The Army and Navy viewpoint was also taken into consideration. In this connection the standards which it is felt should be upheld in the interest of the public health appeared to be in conflict with the concensus of the groups contacted which groups generally agreed that the present arrangement or situation, insofar as labeling is concerned, should be permitted to continue. The compromise which has been suggested by the U. S. Public Health Service was offered by this department. The gist of this suggested compromise was that Grade "A" be deleted from the label and instead of Grade "C" (which is the category in which much of the products in question belong) a plain "pasteurized milk" label be used. On Grade "A" products produced locally or otherwise the suggestion carried the proviso that the producer be allowed to continue to use the Grade "A" label so long as standards were maintained. This was the official position of the Bureau on the matter but no attempt was made by the Bureau to enforce, through court action, the emergency labeling on a State-wide basis.

The Bureau communicated with the State Department of Agriculture and with the State Attorney General's office in an effort to determine if something could be done as an emergency measure, and for the war duration only, to permit standardization and/or reconstruction of milk in an effort to help alleviate the milk shortage. The State Department of Agriculture, however, did not consent to reconstruction and considered that the State law should be followed in the matter.

It is the understanding of the Bureau that the program for compulsory testing of milk herds for Bang's disease which was carried on by the U. S. Bureau of Animal Industry and the State Livestock Sanitary Board continues to be in a more or less abandoned status. This, of course, has increased the concern of the Bureau greatly in that it has in turn increased the health hazard inherent in raw milk and because that as a result of wartime circumstances it has become even more difficult to be sure that pasteurization is properly carried out. In view of this absence of a thorough Bang's testing program, and because of the circumstances involving extreme shortages of trained milk plant personnel, one of the chief efforts of the Bureau during the year was to see, as far as possible, that proper pasteurization is accomplished. Furthermore, it is planned to project this special effort over into the next year's activities.

During the year the routine program of the Bureau for promotion of milk sanitation has been greatly curtailed. Efforts have been

directed at "holding the line" rather than expansion. Generally speaking, the sanitation status of the fluid milk supply has deteriorated at many points in the State. It is not intended to infer that there are not many individual cases where sanitary standards have been maintained, but these cases it is felt are rather in the minority. To intensify this situation the demand for milk, as stated before, has been very great. Coupled with this, dairy farms and milk plants have operated, as a rule, at over-capacity and refrigeration facilities have been over taxed. In at least a few places this particular situation was relieved toward the latter part of the year because of some of the milk from out of State sources being shipped in already processed and packaged for delivery to consumers.

In evaluating routine promotion of milk sanitation it should be brought out that this program of the Bureau has also been handicapped by the rapid turn-over in local health department inspection personnel during the year. Well trained sanitarians who have had to enter the armed forces have been impossible to replace. Of course, this has resulted in the necessity of spending considerable time training new appointees.

In areas where new and inexperienced personnel were taken on, the Bureau in working with local health departments experiencing such conditions, has recommended and assisted in inaugurating somewhat streamlined milk sanitation programs. Such programs have been trimmed back to basic fundamentals, consisting principally of excreta disposal, water supplies, cleaning and sterilization of equipment and refrigeration. In such areas it has been the advice of the Bureau to local health officers to operate under State regulations for the time being rather than promote local regulations.

Considerable time was spent in developing long-range milk sanitation programs for counties in the north western part of the State that had had no definite local programs heretofore. These counties included Okaloosa, Walton, Washington, Holmes and Santa Rosa. This area is, of course, mostly rural and it was found that very few of the small towns had any form of milk ordinance. The town of Milton in Santa Rosa County was found to be an exception. However, the local milk ordinance there was inadequate for Milton's needs. In September, the Bureau suggested to the City Council of Milton an ordinance modeled after the Standard Milk Ordinance and Florida State Sanitary Code. The suggested ordinance was adopted by city officials and was done with the understanding that the county Health Department Director would assign an experienced milk sanitarian to assist in putting the ordinance into effect. This assignment was made by the director of that department and the Bureau worked with the sanitarian in initial procedures of the ordinance provisions.

In the area embracing the counties above recited, the Bureau concurred with the directors of the health departments concerned in the thought that for the time being the milk sanitation program can be based on State rules and regulations pending adoption of local ordinances by communities concerned. This permitted application of uniform regulations throughout the area and the decision was reached to give the dairymen concerned sufficient time, of course, to meet the minimum requirements of such State rules and regulations and law. Incidental to this program in that area, close co-operation with Army officials at Eglin Field was established, and the milk program inaugurated and carried out on a co-operative basis where such military authorities were concerned. The spirit of co-operation of the Medical Department at that military establishment was of considerable benefit in the program. The chief concern of the Bureau and the local health departments was to make pasteurized milk available to the populace of that area where heretofore it was unavailable in almost every locality. Effort was also directed toward the elevation of the sanitation status of the raw milk dairies to the Grade "A" level. Plans and specifications have been submitted for two pasteurizing plants in the area and for seven Grade "A" raw milk establishments.

FOOD AND MILK SEMINAR

Although not entirely relating to milk sanitation, one of the outstanding features of the overall program in 1943 was the Food and Milk Seminar held late in May in Jacksonville. Arrangements were made by the Director of the Bureau, with the approval of the State Health Officer and local health officers concerned, to defray expenses of local sanitation personnel to come to Jacksonville for the three-day school or seminar. This made it possible for practically every county health department's sanitation personnel to be represented. This seminar was given as a co-operative undertaking between the Office of District No. 4 of the U. S. Public Health Service and the department.

The program of the Food and Milk Seminar was set up and carried out in a practical manner. Problems discussed and demonstrations performed were in the nature of those with which the sanitarians were confronted in their work in the field. These discussions were led by men with practical experience as well as technical knowledge of their subjects. Only the practical angles were stressed. Working models were used for demonstration as well as projection slides and motion pictures. Local milk plant operators were among those participating in the lectures and demonstrations.

A summary of activities in 1943 in tabulated form is submitted as follows:

1.	Dairies inspected	499
2.	Pasteurization Plants inspected	191
3.	Pasteurization Plant plans submitted	11
4.	Dairy Barn and Milk House plans submitted	19
5.	Defense Areas surveyed	8
6.	School Conferences held	1
7.	Interstate Carrier Supplies inspected	21
8.	Interstate Carrier Supplies disapproved	4
9.	Out-of-State investigations	2

PROGRAM

FOOD and MILK SEMINAR

Jacksonville, Florida — May 24, 25, 26, 1943
Sponsored by
District No. 4, U. S. Public Health Service
and
Florida State Board of Health

Monday, May 24, 1943

8:30- 9:00 A. M.	Registration
9:00- 9:30 A. M.	Opening Formalities—Dr. Henry Hanson, State Health Officer, Florida State Board of Health, Jacksonville.
9:30- 9:45 A. M.	Purpose of the Seminar and General Introductions—J. B. Miller, Acting Director, Bureau of Sanitary Engineering, Florida State Board of Health, Jacksonville.
9:45-10:30 A. M.	The Food and Milk-Borne Diseases—Dr. W. W. Rogers, City Health Officer, Jacksonville, Florida.
10:30-10:45 A. M.	Discussion and Questions
10:45-11:15 A. M.	Food Handlers Short Course—History and development of U. S. Public Health Service Food Sanitation Code—T. H. Butterworth, Associate Milk Specialist, U. S. Public Health Service, New Orleans, La.
11:15-11:25 A. M.	Discussion led by S. D. Macready, Sanitation Consultant, Florida State Board of Health, Jacksonville.

11:25-11:45 A. M.	Walls, Ceilings, Floors, Lighting and Ventilations—L. H. Male, Sanitary Engineer (R)
11:45-12:00 Noon	Discussion led by R. G. Carter, Technical Sanitarian, Florida State Board of Health, Jacksonville.
12:00- 1:30 P. M.	Lunch
1:30- 2:30 P. M.	Films on Food Sanitation; Followed by Discussions.
2:30- 3:00 P. M.	Water Supply, Sewage Disposal and Cross Connections—F. A. Eidsness, Assistant Sanitary Engineer, Florida State Board of Health, Jacksonville.
3:00- 3:15 P. M.	Discussion led by Russell Broughman, Chief of Sanitation, Dade County Health Department, Miami.
3:15- 3:25 P. M.	Recess
3:25- 3:55 P. M.	Construction and Cleaning of Restaurant Equipment—L. H. Male.
3:55- 4:05 P. M.	Discussion led by V. M. Bryant, Sanitarian, Wakulla County Health Department, Crawfordville.
4:05- 4:45 P. M.	Bactericidal Treatment, Dishwashing Machines —T. H. Butterworth, Associate Milk Specialist, U. S. Public Health Service, New Orleans.
4:45- 5:00 P. M.	Discussion led by Dr. A. H. Williamson, State Milk Consultant, Florida State Board of Health, Jacksonville.

Tuesday, May 25, 1943

8:30- 9:15 A. M.	Proper Food Storage, Refrigeration and Display—L. H. Male.
9:15- 9:25 A. M.	Discussion led by C. R. Fox, Senior Sanitarian, Duval County Health Department, Jacksonville.
9:25- 9:45 A. M.	Personal Hygiene and Health Certification of Food Handlers—Dr. E. F. Hoffman, Acting Director, Bureau of Epidemiology, Florida State Board of Health, Jacksonville.
9:45- 9:55 A. M.	Recess
9:55-10:25 A. M.	Importance of Restaurant Sanitation in War Areas from U. S. Army Viewpoint—Col. C. B. Callard, Post Surgeon, U. S. Army, Camp Blanding.

10:25-11:00 A. M.	Organizing and Maintaining Sanitary Supervision of Restaurants—S. D. Macready.
11:00-11:10 A. M.	Discussion led by R. G. Carter.
11:10-12:00 Noon	Round-table on Food Sanitation led by T. H. Butterworth.
12:00- 1:00 P. M.	Lunch
1:00- 1:30 P. M.	Milk Sanitation Program for War Areas—T.H. Butterworth.
1:30- 1:50 P. M.	Discussion led by L. E. Johns, Senior Sanitarian, Broward County Health Department, Fort Lauderdale.
1:50- 2:35 P. M.	Control of Diseases Communicable from Animal to Man—Dr. D. A. Saunders, State Experiment Station, University of Florida, Gainesville.
2:35- 2:50 P. M.	Recess
2:50- 3:20 P. M.	Pasteurization Plant Design—(To be selected)
3:20- 4:00 P. M.	Pasteurization Plant Operation—Maurice A. Shapiro, Assistant Sanitarian (USPHS), Florida State Board of Health, Pensacola.
4:00- 5:00 P. M.	Floor Discussion led by W. D. Monroe, Senior Sanitarian, Pinellas County Health Department, Clearwater.

Wednesday, May 26, 1943

8:30- 8:50 A. M.	Responsibility of a War-Time Sanitarian—S.D. Macready.
8:50- 9:20 A. M.	Proper Milk Sampling Procedure—Dr. A. H. Williamson.
9:20- 9:50 A. M.	Priorities as They Affect the Restaurant and Dairy Industries—W. E. Wilcox, Priorities Manager, War Production Board, Jacksonville.
9:50-10:20 A. M.	Price Control as it Affects the Restaurant and Dairy Industries—C. W. Butler, Director Office of Price Administration, Jacksonville.
10:20-10:35 A. M.	Recess
10:35-11:35 A. M.	Cleaning and Bactericidal Treatment of Dairy Utensils, and Sterilizing Cabinet Design—Dr. A. H. Williamson.
11:35-12:00 Noon	Practical Care and Operation of Bottle Washing Machine—Maurice A. Shapiro.
12:00- 1:00 P. M.	Lunch
1:00- 1:30 P. M.	Practical Care and Operation of the Milking Machine—(To be selected)

1:30- 2:30 P. M. Pasteurization Plant Tests, Recording and Indicating Thermometer Requirements, Time and Temperature Control—T. H. Butterworth.

2:30- 3:30 P. M. Hand Washing Facilities, Sanitary Piping, Construction and Repairs of Equipment Refrigeration and Storage—L. H. Male.

3:30- 4:00 P. M. Discussion led by A. H. Williamson.

4:00- 5:00 P. M. Round-table on Milk Sanitation led by L. H. Male.

SEAFOOD SANITATION

General Remarks

Personnel. In August the seafood sanitarian was separated from the department. The sanitary officer from the Gulf-Franklin-Wakulla County Health Department, who had experience in shellfish sanitation, was transferred into the Bureau to carry on the seafood sanitation program.

New Shellfish Manual. Of considerable general interest in the seafood sanitation program of the Bureau has been the advent of the new manual suggested by the U. S. Public Health Service. This Manual entitled, ''A Manual of Recommended Practice for the Control of the Shellfish Industry,'' came to the attention of the Bureau soon after the shellfish season commenced. Simple forms for reporting inspections accompanied the manual and these were tried out in the field. It is intended by the Service that this material shall be tried in the field by all of the states concerned before official adoption for use possibly in the 1944-45 shellfish season.

In making trial applications of stipulations of the manual and also inspection report sheets in the field, physical and sanitary conditions when measured thereby in a number of plants were found to not meet the requirements listed in the manual of suggestions.

Public Health Service Checking. As in past years, shellfish inspectors from the Office of District 4 of the U. S. Public Health Service check the physical and sanitary items of plants under the jurisdiction of the Bureau. Incidental in this connection, representatives of the Service also made a trial application of the manual to these plants. The particular interest of the Service, of course, lies with shellfish establishments making interstate shipments. The Service officers made recommendations for repairs, remodeling and more efficient sanitary practices.

Improvements Contemplated. In anticipation of possible use of the new Service manual on shellfish sanitation, considerable effort has been expended to bring the plants up to the new standards suggested. Through urgency and education the Bureau is glad to report that eleven plants are planning to remodel or enlarge during the summer of 1944. Eight of such plants are in the Apalachicola district. One of the largest operators intends to build an entire new shucking and packing plant. The mutual desire is, of course, to construct a model oyster plant for Florida. Plans, specifications and other information are being organized by this Bureau for recommendation to both crabmeat packing houses and oyster shucking plants for remodeling, enlarging and new building.

Sanitization Methods. As with many other enterprises which are given sanitary supervision, the matter of proper equipment, which is difficult to obtain now because of war conditions, has caused some lowering of standards for bactericidal treatment of utensils and other contact equipment. This situation has been evident during the year in both crabmeat picking plants and oyster shucking houses. Considerable stress has been placed on this item of sanitation and all plants have been advised to provide bactericidal treatment equipment to comply with the State Sanitary Code. Continued effort has had to be exerted to bring this about to any degree of satisfaction.

Health Certification. The oyster shuckers, crabmeat pickers, and handlers, in all plants are physically examined, blood tested and stool specimens examined for typhoid fever and dysentery. Those workers approved were issued the regular State Board of Health food handlers' certificate.

Carriers Found. From stool specimens submitted in the course of having seafood workers examined for health certification, organisms of bacillary dysentery from three workers were found, Organisms of amoebic dysentery from three workers were also found and organisms of typhoid fever from one worker was revealed. All of these workers were isolated from food handling and were placed under epidemiological supervision.

Disease Cases. Although suspicion arose in one or two instances no cases of infection of enteric origin were found to be directly traceable to any oyster shucking or crabmeat picking plant during the year.

Legal Procedure. No cases were tried in court during the year. A few violators were stopped and warned. In order to control the individual violators, principally ''bootleggers'' operating from remote sections, the Bureau, through arrangement with the State Conservation Department, plans to enlist the assistance of that department's field agents. Through such arrangements, those agents will be in a position to follow up and witness actual shellfish "bootlegging" transactions and would, of course, be in position to give legal testimony if necessary.

Shellfish. The Bureau continued the co-operative arrangement with the Public Health Service in the sanitary control of shipments of oysters into the State from other shellfish growing areas. Information is exchanged with the Office of District No. 4 of the Public Health Service at New Orleans. This information is used by the headquarters Office of the Service in preparing the "List of Approved Shellfish Shippers."

Related to the foregoing was the action which was taken when the Bureau located 750 gallons of raw oysters which were uncertified. This shipment made into the State was held in cold storage pending receipt of further information regarding certification. Then several days later certification was made in the State of origin of the shipment, which covered the shipment in question and this quantity of shellfish was then released by the Bureau.

Seized and Destroyed. Also, several gallons of shipped-in oysters found in markets of definite localities of the State were discovered and upon investigation it was ascertained the shippers were not on the approved list. These shellfish were seized and destroyed by the Bureau. Several bags of shellstock oysters found without certification identification tags were also seized and destroyed.

Surveys. The Bureau has made and compiled twenty-two sanitary and bacterial surveys. A booklet of maps delineating the condemned areas resulting from such surveys has been made available to the oyster industry and agencies interested. Single area maps are available to all citizens. During the year this material was brought up to date and added to as indicated in the section of this report on "Tidal Water and Stream Pollution."

Condemned Area Control. This year, through the kind co-operation of the Supervisor of the State Department of Conservation, arrangements were made to patrol the condemned shellfish areas. The Conservation agents in the course of their routine duties of contacting the fishermen and oystermen at their work, observed the activities going on in condemned areas. It is expected that this arrangement will be of considerable benefit to the efforts of the Bureau in seeing that taking of shellfish from such areas by oystermen, as well as by lay persons on picnics, etc., is held to a minimum. In making observations, the Conservation agents through this arrangement report on a written form with regard to shellfishing in the condemned areas, the presence or absence of condemned area warning posters, etc. Their reports are submitted by the Supervisor of the Conservation Department to the Bureau every month.

Table 3. Appearing below is tabulated outline of activities pertaining to shellfish sanitation for 1943.

Shellfish Sanitation

Open Season — Oysters and Clams — October 1 — April 15 — Extended to May 15 in 1943

Raw Oyster Shucking and Packing Plants	No. of Plants	No. Insp. Made
Number certified and inspected for interstate shipment (Inspections by State and USPHS)	22	165
Number certified and inspected for intrastate shipment (Inspections by State)	13	91
Number certificates revoked for noncompliance with State Sanitary Code	0	
Total number plants operating in State	35	256
Raw Oysters Shellstock Houses		
Number certified and inspected for interstate shipment (Inspections by State and USPHS)	1	8
Number certified and inspected for intrastate shipment (Inspected by State)	16	68
Number certificates revoked for noncompliance to Chapter XV State Sanitary Code	3	
Total number shellstock houses operating in the State	14	76
Raw Scallop Shucking and Packing Plants		
Number certified and inspected for intrastate shipment (Inspections made by State). All located in Sarasota	3	12
Raw Clam Shucking and Packing Plants	0	0
Cooked Clam Shucking and Packing Plants		
Located in Naples. A large operation engaged in dredging, shucking, canning and steam-pressure cooking. (State and U. S. Pure Food and Drug Administration)	1	2

Crabmeat Picking

The crabmeat picking business in Florida has more or less boomed during the year. Most of these plants ship their product interstate. In general, their physical and sanitary condition has been above that of the oyster shucking plants. This is largely due to the fact that the crabmeat industry is younger. Sanitary supervision of this Bureau was established when this industry was in its infancy, so to speak, and has made it possible to assist with design of physical equipment of the plants before the same were installed.

Improvements. During the year a fairly large dealer made extensive changes in his layout at Welaka. Several cooking operations have been moved inside or enclosed. The practice of keeping containers of chlorine solution at the hand of each picker has been carried out. As mentioned above, it is expected that a considerable number of plants will be rebuilt and several new plants will be constructed. During the year considerable effort has been expended by the Bureau on preliminary details in connection with these anticipated expansions.

Table 4. Appearing below is tabulated outline of activities of the Bureau pertaining to crabmeat and crayfish sanitation.

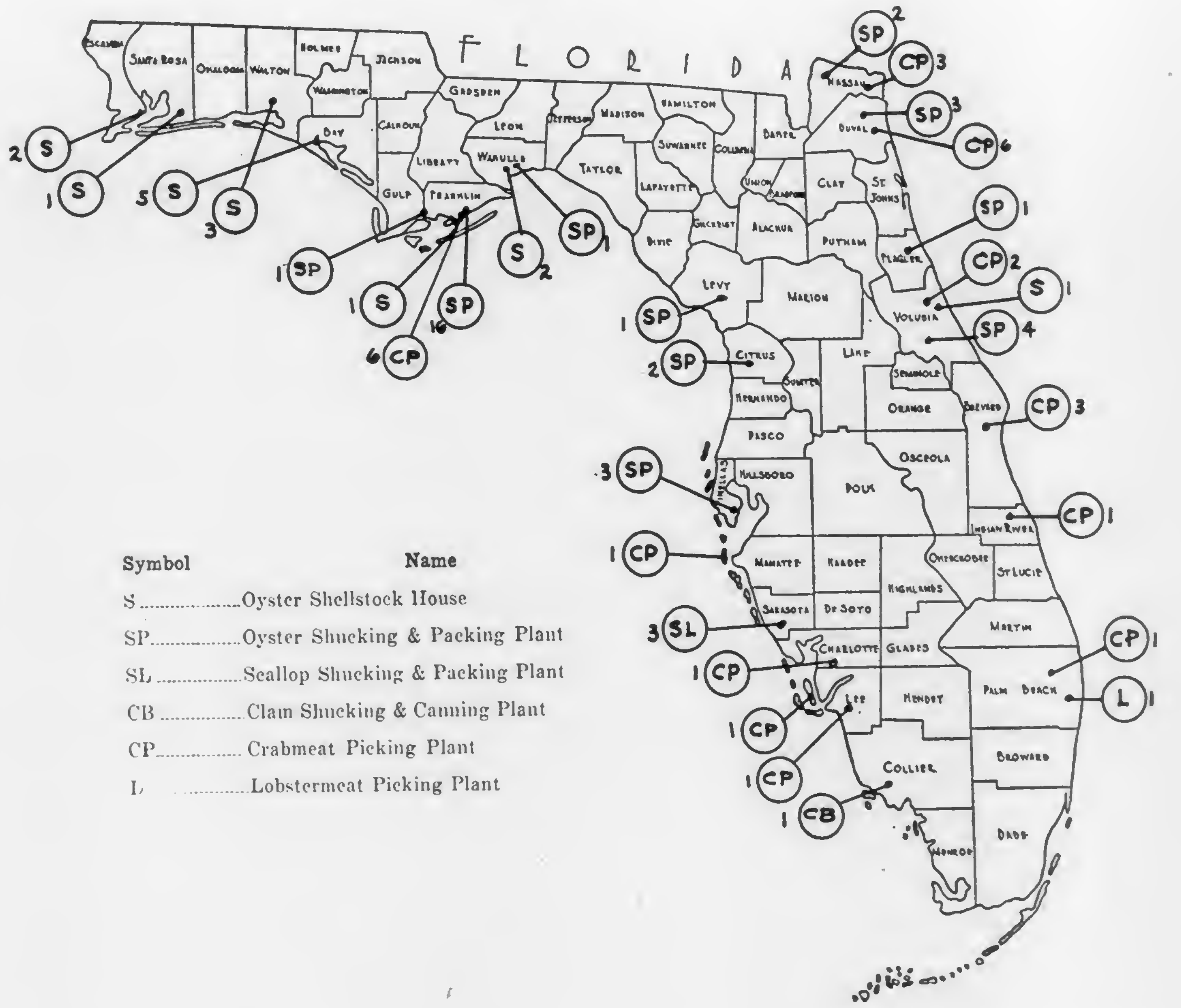
Crabmeat and Crayfish Sanitation

Cooked Crabmeat Packing Plants	No. of Plants	No. of Inspections Made
No closed season except on spawning females.		
Number certified and inspected for interstate and intrastate shipment (Inspections by State and U. S. Pure Food and Drug Adm.)	27	143
Number certificates revoked for non-compliance with State Sanitary Code	1	
Total number plants operating in the State	26	
Crayfish Lobstermeat Packing Plants		
Non-operating in State this year. Two plants in Miami closed because of labor shortage	0	0

Outlook for 1944-45. In figure I (Map) is seen map showing location of establishments in the seafood industry coming under the sanitary control of the Bureau in 1943. In the ensuing year it is expected that the industry will be expanded still more, particularly in connection with crabmeat picking. Regardless of acute labor shortage throughout the industry, both the oyster and crabmeat processing plants are realizing a profit. The unprecedented demand, with high market prices, is of course the reason. This condition is favorable to the Bureau in getting operators to remodel and comply with sanitary requirements. It is expected that the 1944-45 season will be started with better equipped and more sanitary plants.

SHELLFISH PLANTS IN OPERATION DECEMBER 31, 1943

(Fig. I)


FLORIDA
Symbol
Name
S Oyster Shellstock House
SP Oyster Shucking & Packing Plant
SL Scallop Shucking & Packing Plant
CB Clam Shucking & Canning Plant
CP Crabmeat Picking Plant
L Lobstermeat Picking Plant

DRAFTING DIVISION

The drafting division has for the year of 1943 assisted the various divisions of the Bureau in the preparation of surveys, reports, charts, graphs and forms.

All plans for construction of water treatment plants, sewage treatment plants and various other types of projects listed by other divisions as reviewed or approved for the year 1943 have been filed and recorded by the drafting division.

Approximately 3,000 square feet of Malaria Control in War Area Maps were reproduced at cost for the Bureau of Malaria Control. Considerable assistance was also given the Bureau of Epidemiology in the preparation of charts and graphs of dangerous communicable diseases. Approximately 375 square feet of these charts and graphs were reproduced on the Ozalid black-line machine.

The Ozalid black-line machine further proved its value to the Bureau in 1943 as a time-saver and from an economical standpoint. Among other accomplishments of this division for the year are the following:

1. Preparation of plans for an infant incubator, a considerable number of which were built by the State Board of Health.
2. Revision of the sanitary pit privy plans, for construction with non-critical material.
3. Preparation of prefabrication plans for the mass production of sanitary pit privies in Civilian Public Service Camps operating under the technical supervision of this Bureau.
4. Production of plans for an emergency pit privy.
5. Preparation of charts and diagrams used in connection with courses of correspondence study for sanitation personnel conducted through the general Extension Division of the University of Florida.

VENEREAL DISEASE CONTROL

R. F. SONDAG, M.D., Director

As each year passes, inventory is taken on the activities engaged in by the Division of Venereal Disease Control. The year 1943 was no less momentous than previous years and the enormous increase in problems presented to the Division became more voluminous with each passing month. It is the purpose here to describe the activities carried on by the Division of Venereal Disease Control, to present correct information concerning the prevalence of venereal diseases in Florida, to keep alive the interest and cooperation of every citizen in Florida in the fight to eradicate these insidious diseases and to record these activities for the archives.

The morale and fighting efficiency of this Nation, including the State of Florida, are greatly dependent upon the physical and mental well-being of both its civilian and its military population. Since the onset of mobilization, each year has been a busy one for the Division of Venereal Disease Control, due to the normal problems which have been with us for years, plus the problems caused by the war-swollen population of service men in training bases, their families, and their friends. Considerable emphasis has been placed on checking the spread of contagious diseases, particularly syphilis and gonorrhea; however, our paramount health problem continues to be venereal diseases.

In the Annual Report, a year ago, numerous charts, graphs, and tables were presented showing the marked increase of syphilis and gonorrhea not only in the State of Florida, but also for the country as a whole. The results of the blood tests for syphilis secured from the first 1,895,778 selectees, (white and negro men of known residence, aged 21 to 35 inclusive), examined for army service through August 31st, 1941, provided an excellent cross section and the first truly accurate figures on the prevalence of syphilis in the United States. These figures revealed that Florida led the Nation with a syphilis rate of 405.9 per 1,000 negro men examined, was third with a rate of 53.3 for white men examined and second with a combined rate of 158.6 per 1,000 men examined. These figures were startling and disclosed the high incidence of syphilis among the negro population. The fact that the prevalence of syphilis in the negro population is eight times that of the white population causes a great many individuals to place the entire blame on the negro race for Florida's unenviable standing among the States. The prevalence of syphilis in the white race is also high and should be considered with the same degree of solemnity as is the negro rate.

Syphilis has been called primarily a disease of large cities, seaports, and industrial areas. A further evaluation of the selectee figures divulges the fact that the urban rate of the men examined was 46 per 1,000 while the rural rate was 44 per 1,000. The largest cities in the United States had rates of less than 25 per 1,000; whereas, the rate for the Nation as a whole was 45 per 1,000 men examined. The rate for the white men of the country as a whole was 23 per 1,000; whereas, the rate for the negro men was 272 per 1,000. These data clearly indicate that although a great deal of emphasis must be directed toward the negro rate, one can not overlook the equally important high rate in the white population in Florida.

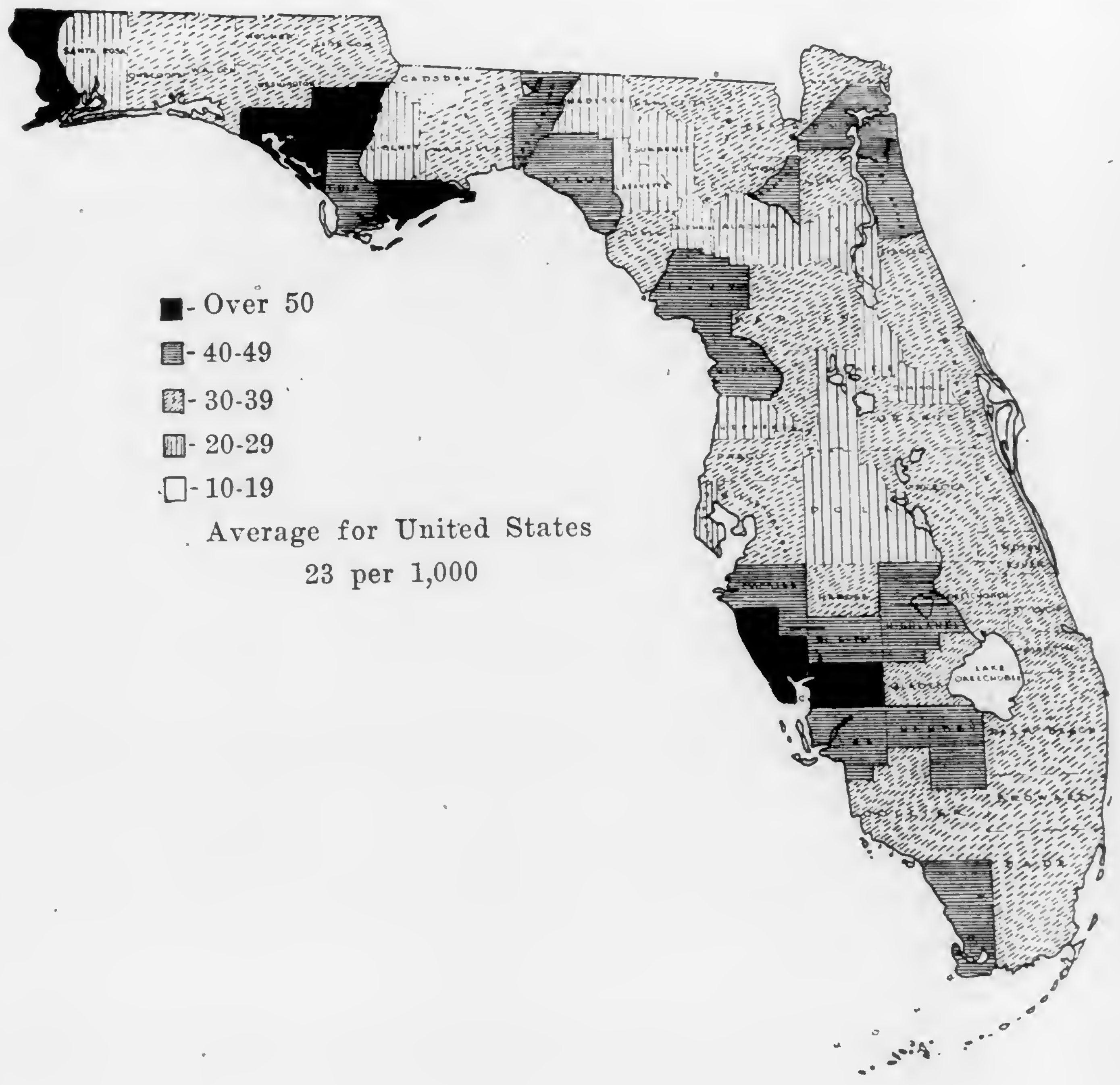
TABLE 1.—RATES* PER THOUSAND ON SELECTEES TESTED IN FLORIDA THROUGH DEC. 1942 AND THROUGH DEC. 1943 BY COLOR

Year	Total Examined	Number Positive	Negro Rate	White Rate	Total Rate
Thru					
12-42	180,279	27,267	303.8	31.3	151.2
12-43	292,157	40,810	287.1	36.7	139.7

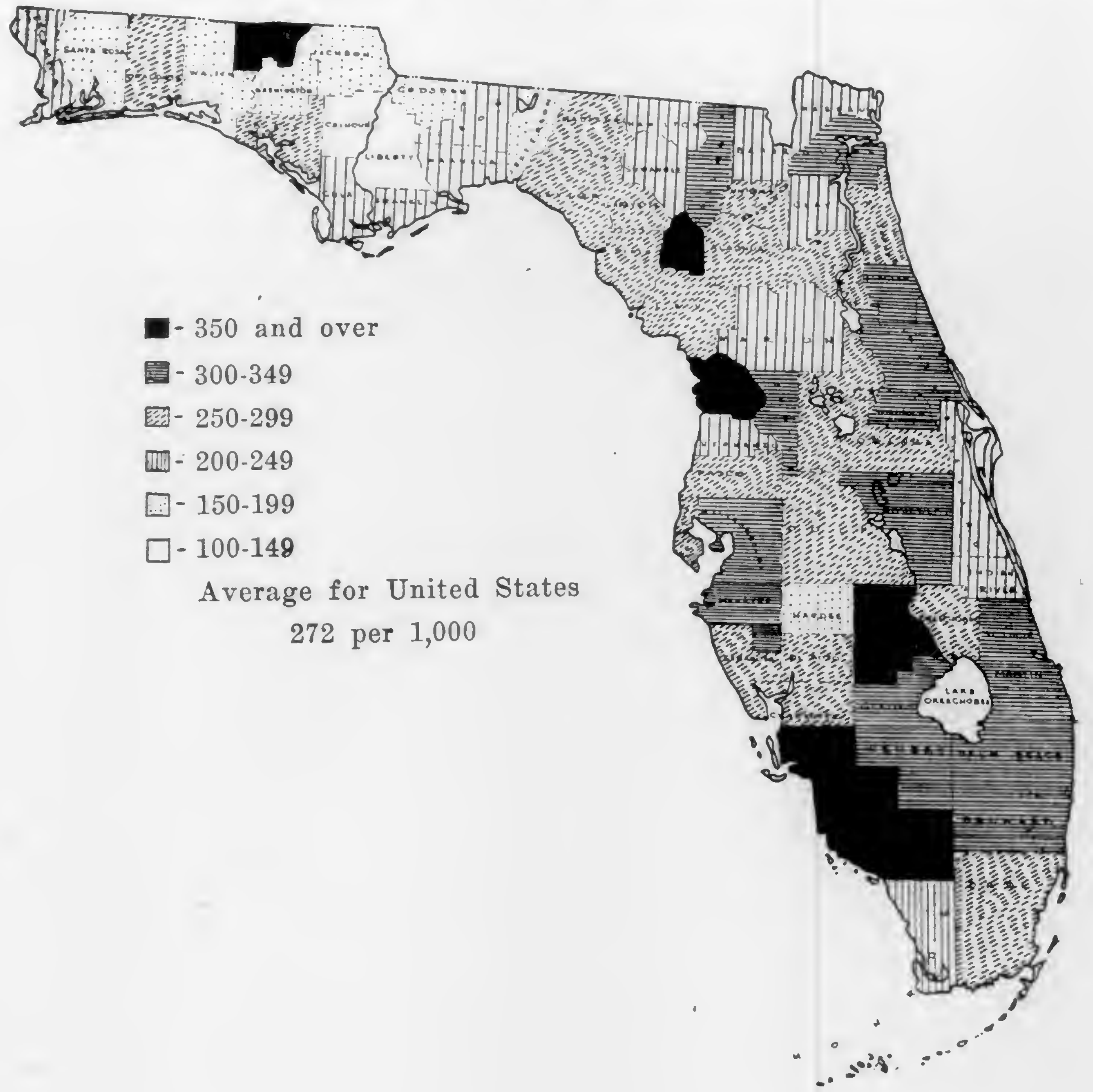
*Rates Not Corrected for age, color or residence.

The number of selectees of all ages examined in the State of Florida with positive serologic blood tests through December 1942 and 1943 is shown in Table 1. It must be remembered that the figures presented in this table represent selectees of all ages examined for Army service, and no comparision to the rates previously quoted can be made, since the former have been corrected for race, age, and residence. It is significant to note, however, that in this table, over a period of one year, the negro rate has been lowered; whereas, the white rate has been slightly elevated. The factors responsible for this change in rates may be any one of the following: older group of men examined; proportionately more white than colored men tested; marital status; economic status; and residence (urban or rural). The prevalence of syphilis for selectees tested in Florida through November 1943 for white, colored, and combined rates per 1,000 by counties is shown in Maps 1, 2, and 3.

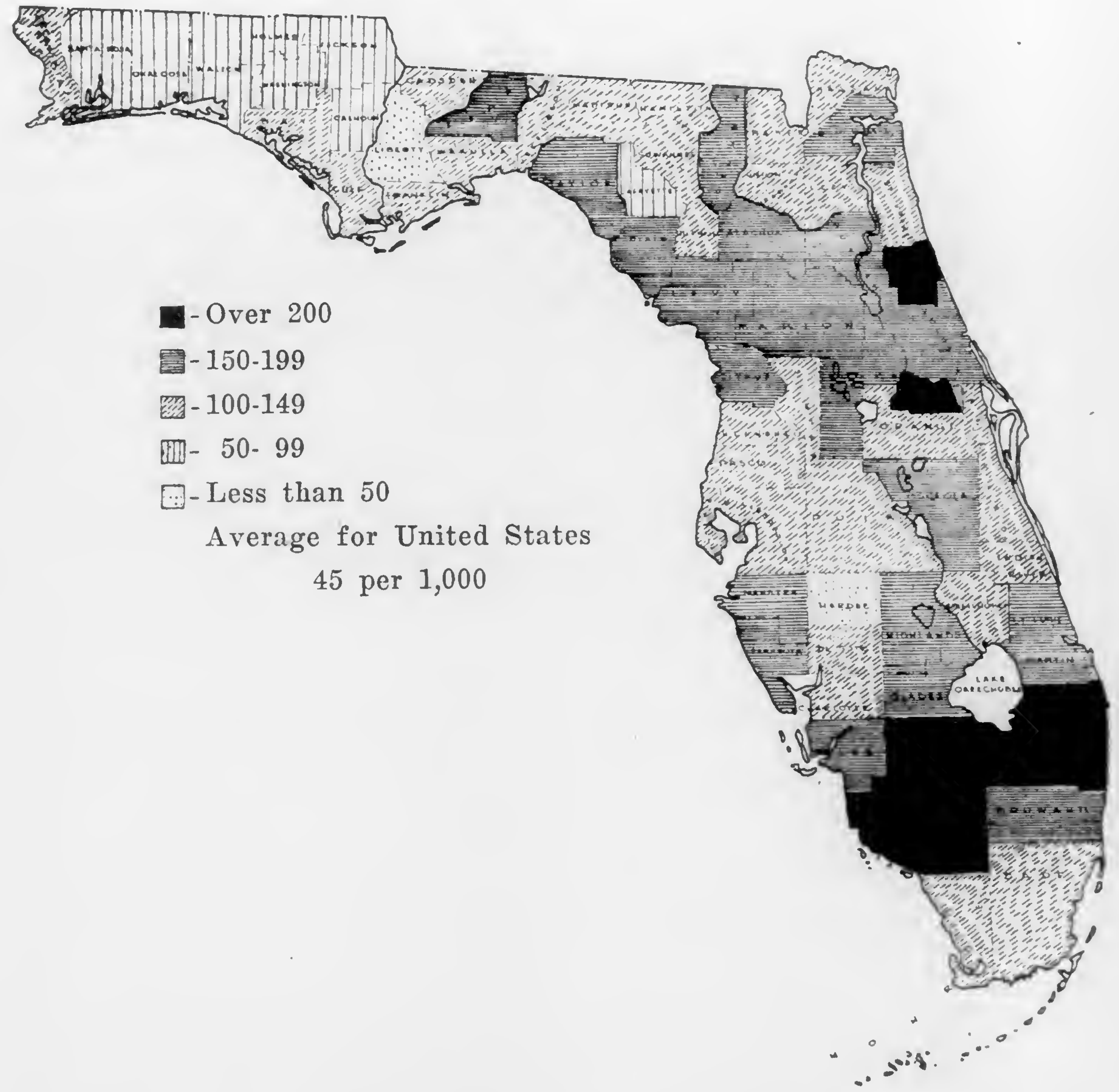
MAP 1. SYPHILIS RATES PER 1,000 OF ALL WHITE SELECTEES TESTED IN FLORIDA, BY COUNTY, THROUGH NOVEMBER 1943



MAP 2. SYPHILIS RATES PER 1,000 OF ALL COLORED SELECTEES TESTED IN FLORIDA, BY COUNTY, THROUGH NOVEMBER, 1943.



MAP 3. SYPHILIS RATES PER 1,000 OF ALL SELECTEES TESTED IN FLORIDA, BY COUNTY, THROUGH NOVEMBER 1943



The figures projected on these maps in the form of rates per 1,000 for white and colored still present a rather dark picture for the State as a whole. Since most officials and citizens have become rate conscious as a result of the enormous venereal disease problem in this State, each county can readily ascertain its standing by reviewing these maps. Those who deal with the problem are always anxious to know their relative position in regard to other counties, cities, or communities, and the slightest downward trend is looked upon as a real accomplishment.

CASE FINDING PROGRAM

The number of selectees found with positive serologic tests continues to be an excellent source for locating undiscovered cases of syphilis. During the year, however, the armed forces discontinued their policy of rejecting all cases of venereal diseases and now a small percentage of selectees with syphilis is accepted each month for induction on a limited duty status until they have received sufficient treatment to render them non-infectious or cured. This change in policy has reduced the number of serological examinations performed by the State Laboratories during 1943 (see Table 2) because a large number of repeat serological tests were thereby eliminated.

TABLE 2.—SEROLOGIC TESTS FOR SYPHILIS AND MICROSCOPIC EXAMINATIONS FOR GONORRHEA—FLORIDA STATE LABORATORIES—1934 to 1943.

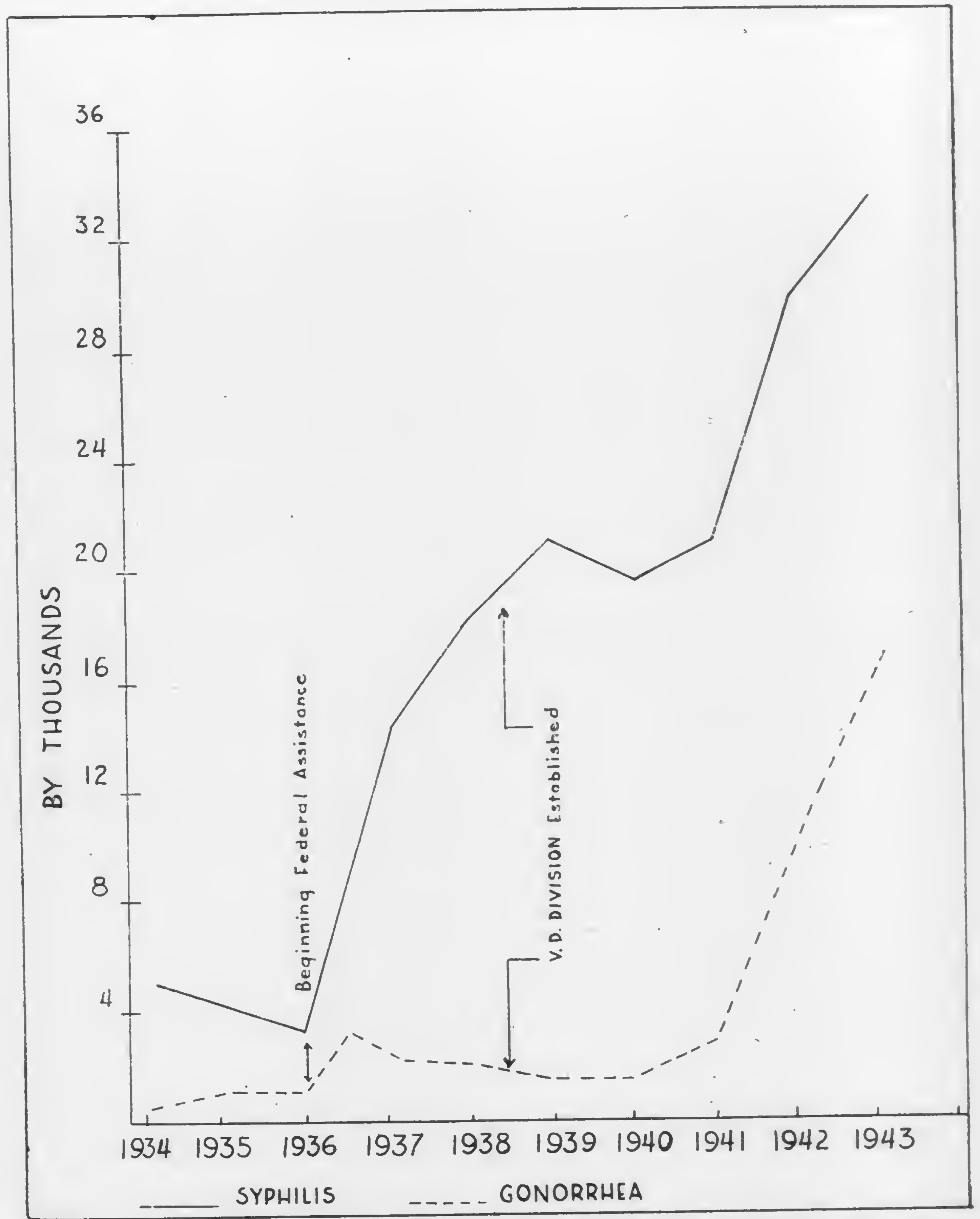
Year	Syphilis	Gonorrhea	Year	Syphilis	Gonorrhea
1934	131,657	17,340	1939	288,241	31,958
1935	136,558	20,450	1940	449,256	35,767
1936	145,928	25,376	1941	908,360	43,591
1937	193,249	28,231	1942	1,239,399	58,936
1938	242,704	28,720	1943	948,299	89,249

During the year, the policy of subjecting each blood specimen to several serological tests was also discontinued, thereby reducing the total number of serological tests performed in 1943 as compared to 1942. Nevertheless, a large number of these selectees thus discovered were rejected for other physical reasons and reported to clinics throughout the State for treatment. The cases of syphilis uncovered by means of Selective Service examinations have not, however, been the only source for finding new cases of syphilis. Further reference to Table 1 shows that over a period of one year, more than 13,000 cases of syphilis were discovered by means of Selective Service examinations; whereas, a glance at Table 3 and Graph 1 shows over 33,000 new cases of syphilis reported in the State.

TABLE 3.—NUMBER OF NEW CASES OF SYPHILIS AND GONORRHEA REPORTED IN FLORIDA FROM 1934 TO 1943.

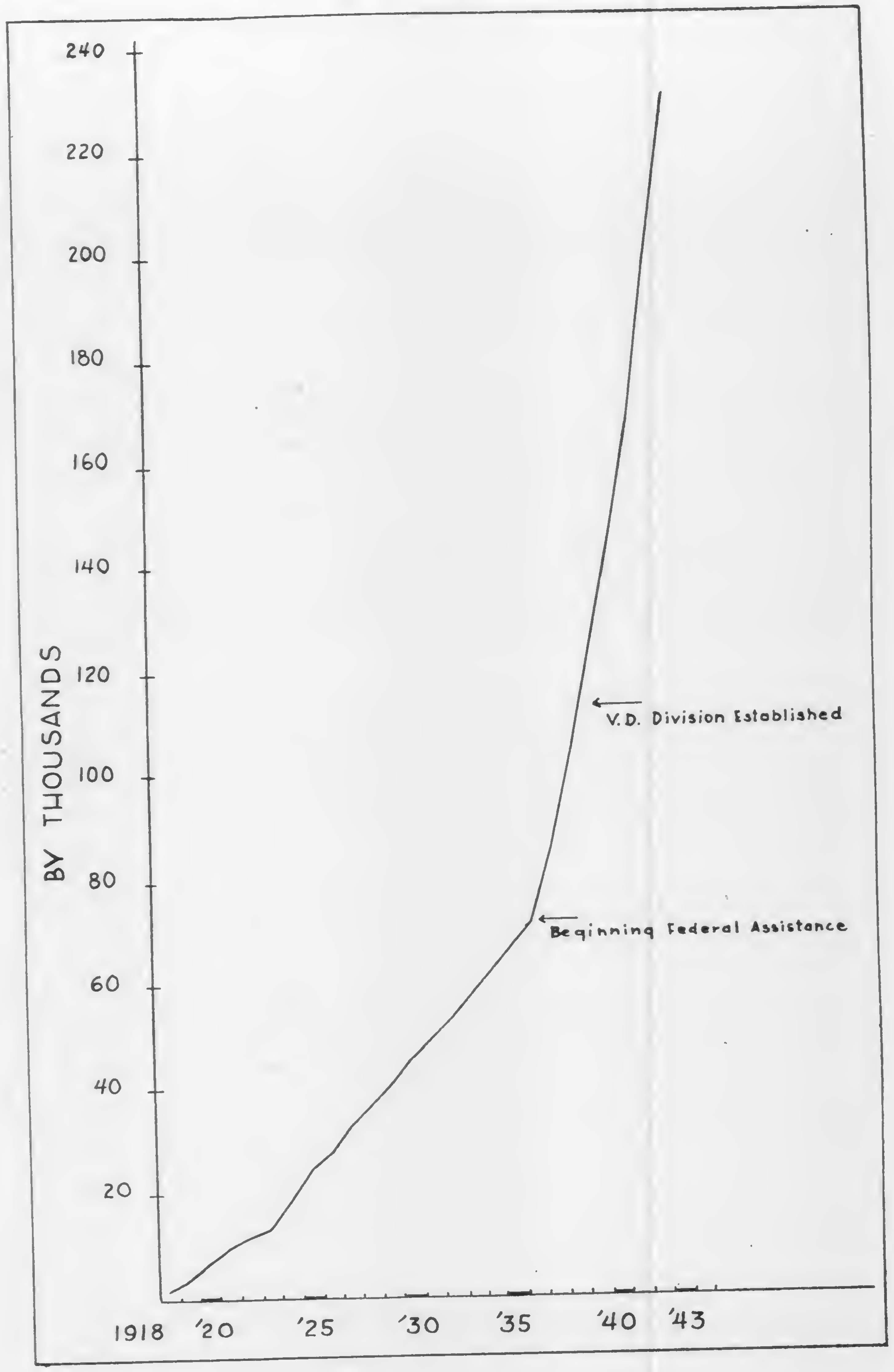
Year	Syphilis	Gonorrhea	Year	Syphilis	Gonorrhea
1934	5,198	702	1939	21,092	1,650
1935	4,389	1,207	1940	19,889	1,870
1936	3,287	1,146	1941	21,258	3,084
1937	14,532	2,411	1942	30,104	10,174
1938	18,243	2,092	1943	33,601	16,957

GRAPH 1. NUMBER OF NEW CASES OF SYPHILIS AND GONORRHEA REPORTED IN FLORIDA FROM 1934 TO 1943



Therefore, approximately 20,000 cases from the "well" of unknown syphilis reported for treatment in the various clinics established in the State. An aroused public, aware of the serious venereal disease problem, the requirement of blood tests of all "health card" applicants, and the epidemiological activities of thirty-four follow-up case workers have aided in discovering the new cases reporting for treatment in 1943. The number of cases of syphilis reported in Florida by year since 1918 is shown in Graph 2.

GRAPH 2. NUMBER OF CASES OF SYPHILIS REPORTED IN FLORIDA BY YEAR 1918-1943

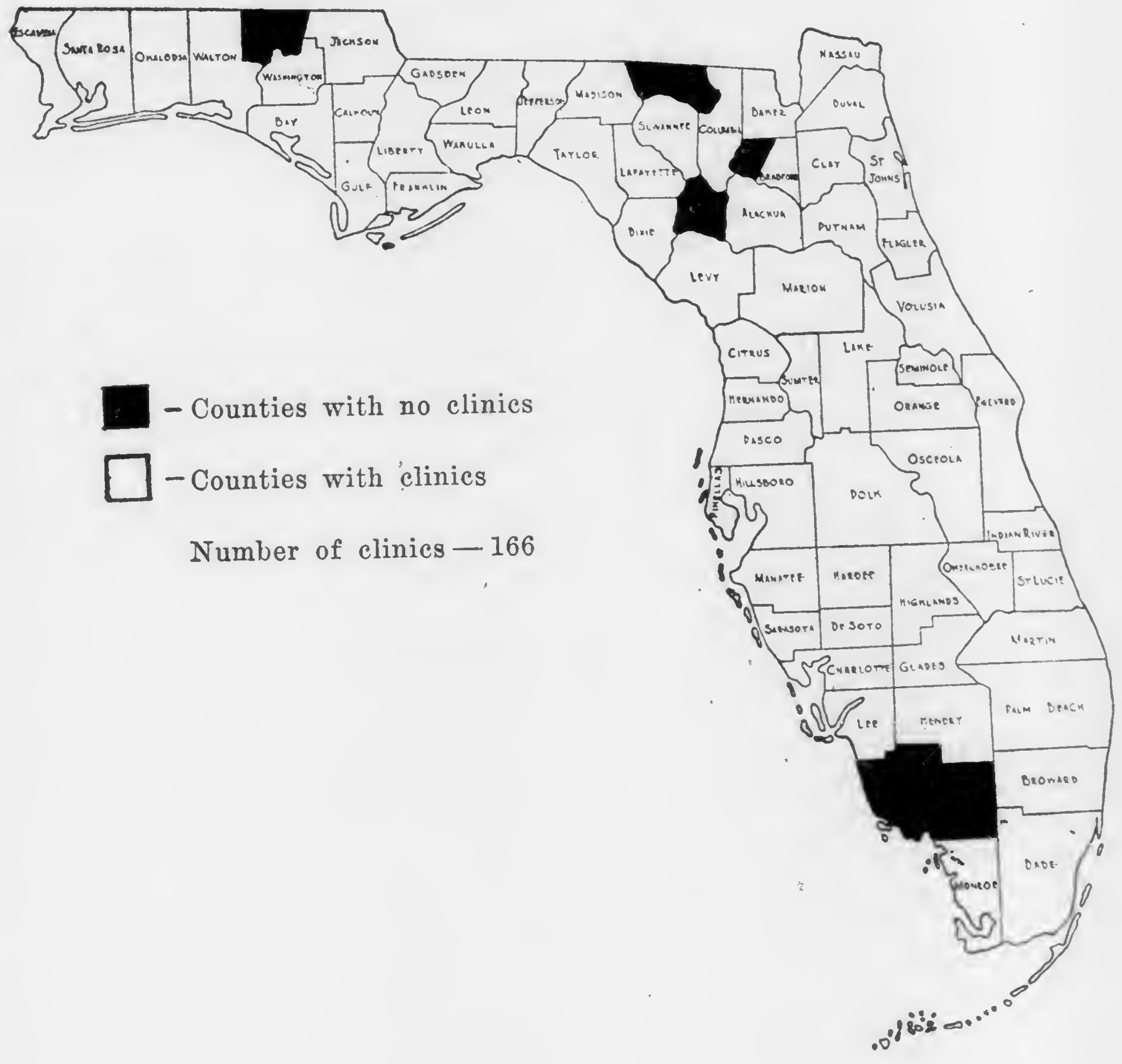


The steep incline of cases reported after the inauguration of the national program in 1936 and the beginning of the allocation of federal funds to the states is immediately apparent. One will note, too, that during this period of time approximately 230,000 cases of syphilis have been reported in the State of Florida, equivalent to one-fourth of the present population. These are rather clear, forceful facts and should serve to re-emphasize the importance of continuing the case-finding program until every case of syphilis has been discovered and brought under treatment.

TREATMENT PROGRAM

Treatment facilities in 1943 for the care of venereal disease cases remained on a par with 1942, with some improvement. Since the Division's report a year ago, Citrus, Hernando, and Okeechobee Counties have established clinics in cooperation with the State Board of Health. (See Map 4)

MAP 4. NUMBER OF CLINICS IN STATE



No funds are provided in Lafayette County; however, clinic facilities are available in some areas. Gilchrist County discontinued financial assistance during the year and no longer has clinics in operation. Union, Hamilton, and Collier Counties are without clinic facilities. Map 4 shows Holmes County having no clinic; however, funds have been provided and a health department established at the beginning of this year (1944). Collier County appropriated funds for clinics; however, we were unable to secure the services of a physician and nurse; therefore, no clinics were established. Many other counties expressed the desire to expand their clinical facilities, but the expansion of the venereal disease program has been seriously handicapped by the shortage of physicians, nurses, and clinic equipment. In spite of this fact though, many improvements were noted throughout the year, and the program to eradicate venereal diseases from this State did not suffer. The drive must continue until all cases of syphilis have not only been reported, but also rendered non-infectious.

Thirteen additional clinics were established during the year (Total now 166, see Map 4) to further implement the control of venereal diseases by instituting competent medical care as soon as diagnosis is made. The large number of cases of venereal diseases reporting for treatment in the clinics shows the extent to which the public has been interested in securing scientific treatment.

Table 3 and Graph 1 show a marked increase in syphilis and gonorrhea for the past ten years; Table 4 shows the number of cases of gonorrhea and syphilis reported in each county for the year, and Table 5 shows the increase in the other venereal diseases in 1943 as compared to 1942.

TABLE 4.—NUMBER OF CASES OF SYPHILIS AND GONORRHEA BY COUNTY REPORTED IN 1943

County	No. Cases (Syp.)	No. Cases (Gon.)	County	No. Cases (Syp.)	No. Cases (Gon.)
Alachua	784	118	Levy	152	62
Baker	45	10	Liberty	7	1
Bay	553	422	Madison	476	38
Bradford	199	86	Manatee	218	187
Brevard	419	91	Marion	1026	77
Broward	742	231	Martin	95	8
Calhoun	48	5	Monroe	308	171
Charlotte	65	33	Nassau	201	126
Citrus	170	11	Okaloosa	171	248
Clay	108	48	Okeechobee	72	0
Collier	35	14	Orange	850	846
Columbia	714	24	Osceola	113	9
Dade	4459	1349	Palm Beach	1274	335
DeSoto	166	47	Pasco	175	4
Dixie	215	0	Pinellas	927	596
Duval	6214	3032	Polk	1135	245
Escambia	792	1127	Putnam	320	39
Flagler	94	8	St. Johns	213	36
Franklin	117	158	St. Lucie	339	105
Gadsden	299	40	Santa Rosa	55	18
Gilchrist	4	1	Sarasota	181	46
Glades	18	8	Seminole	589	210
Gulf	143	13	Sumter	190	165
Hamilton	3	0	Suwannee	377	10
Hardee	36	5	Taylor	127	58
Hendry	181	57	Union	20	1
Hernando	142	2	Volusia	660	260
Highlands	299	260	Wakulla	111	290
Hillsborough	2920	1430	Walton	46	45
Holmes	51	0	Washington	141	22
Indian River	279	16	State Hospital	183	1
Jackson	211	133	Camp Blanding	316	1875
Jefferson	201	64	Naval Air Station, Jax.	36	503
Lafayette	14	0	Out of State	61	32
Lake	380	95	Gov. Hospital	69	2
Lee	286	39	Fla. T.B. Sanat.	2	1
Leon	450	687	Quar. Hospitals	271	616
			State Prison	238	5
			TOTAL	33601	16957

TABLE 5.—NEW CASES OF CHANCROID, GRANULOMA INGUINALE, LYMPHOPATHIA VENEREUM AND OPHTHALMIA NEONATORUM REPORTED IN 1942 AND 1943

Disease	1942	1943
Chancroid	453	844
Granuloma Inguinale	135	251
Lymphopathia Venereum	124	254
Ophthalmia Neonatorum	19	23

That real progress has been made in the control of syphilis in this State is further exemplified by the fact that in 1941 out of 21,258 cases of syphilis only 19% were reported as early infectious cases, in 1942 out of 30,104 cases of syphilis 33% were diagnosed as early infectious cases, and in 1943 out of 33,610 cases of syphilis 40% were diagnosed as early infectious cases. This further illustrates, too, the impact of the venereal disease control program on the general population, in that more and more people have presented themselves to either a clinic or private physician during the early stages of their disease, and have faced the problem rather than concealed the disease or taken treatment from disreputable sources.

Not all cases of venereal diseases report to public clinics, however, since these facilities have been provided for those who find it inconvenient to take their treatments from private physicians. Equally important in the control of venereal diseases is the part played by private physicians. The cooperation received from the Venereal Disease Control Committee of the Florida State Medical Association, the component medical societies, and the individual physicians themselves throughout 1943 was outstanding. The Division is most grateful for the help and assistance received by those unselfish physicians who so willingly labored as clinicians in the venereal disease clinics, and to all physicians who have cooperated with the Division in some manner. During the year the services of our lay investigators were placed at the disposal of the private physicians, so that they too could have delinquent patients returned to their office for completion of treatment. The response to this service was overwhelming, and if used continually, will enable the private physician to give at least the minimum amount of treatment and thereby prevent the later devastating complications of syphilis. The extent to which the private physician has cooperated in the treatment of venereal diseases is indicated in Table 6, which shows the amount of drugs used in 1943 as compared to 1942.

TABLE 6.—DISTRIBUTION OF DRUGS AS TO SOURCES AND KIND FURNISHED BY THE DIVISION FOR 1942-1943.

Drugs	Distributed to Private Physicians		Distributed to Clinics, Hospitals and Others		Total Distributed	
	1942	1943	1942	1943	1942	1943
Mapharsen (In doses)	33,920	54,877	336,310	536,510	370,230	591,387
Neoarsphenamine (In doses)	19,122	9,492	27,080	31,000	46,202	40,492
Sulfarsphenamine (In doses)	365	370	1,760	3,640	2,125	4,010
Tryparsamide (In doses)	150	500	5,700	9,190	5,850	9,690
Bismuth (In cc)	57,150	77,260	546,120	743,430	603,270	820,690
Sulfathiazole (in grms)	3,300	21,500	539,700	588,000	543,000	609,500
Distilled Water (In cc)	553,600	552,200	2,181,500	3,083,300	2,735,100	3,635,500

One can readily see the marked increase in the distribution of free drugs, not only to private physicians, but to clinics, hospitals, and other sources. Enough free drugs were distributed to treat 30,475 new cases of gonorrhea and to administer 1,192,705 treatments for syphilis. A further analysis of Graph 1 and Tables 3 and 4 show that only 16,957 cases of gonorrhea were reported for the year; yet, it is stated above that sufficient drugs were distributed to treat 30,475 new cases. One might ask, "Why the discrepancy?" The probable answer is that most cases of gonorrhea receive more than one course of treatment. One must also consider the fact that not all cases of gonorrhea are reported, although they do receive treatment. The reporting of gonorrhea has lagged far behind that of syphilis, but here too, marked improvement has been made. Table 3 and Graph 1 show that in 1941 only 3,084 cases of gonorrhea were reported as compared to 16,957 in 1943. These figures indicate striking progress, but in view of the fact that gonorrhea is considered three to five times more prevalent than syphilis, one can immediately calculate the number of cases that occur but are unreported.

RAPID TREATMENT CENTERS

(Quarantine Hospitals)

Hospitalization of infectious cases of gonorrhea and syphilis, especially as it pertains to prostitutes, infected delinquent women and sources mentioned by infected enlisted men has been provided for by the establishment of State Board of Health Hospitals designated as Rapid Treatment Centers. During the year 1942, an application was submitted to the Federal Works Agency for funds to maintain and operate these treatment centers, but the funds were not received until January, 1943. It was then necessary to renovate and equip the CCC camps at Ocala and Wakulla, which had been provided for that purpose. The selection of personnel was a tremendous task, but in spite of all the difficulties, the quarantine hospitals, or rapid treatment centers, were opened during March and have expanded considerably during nine months of operation. Prior to the opening of these treatment facilities, jails throughout the State were reportedly overcrowded and officials petitioned the opening of these hospitals. Although this condition existed, those connected with commercial vice and the amateur promiscuous women were not promptly admitted to these institutions. These hospitals were established for the specific purpose of quarantining and treating persons infected with venereal diseases and it was necessary to take most drastic steps to protect the military personnel and reduce to an absolute minimum the number of manpower days lost from venereal diseases. Florida's laws against prostitution, as provided in the State statutes, were found inadequate and thus seriously impeded the admittance of those infected with syphilis and gonorrhea. During the first two months of operation, therefore, relatively few patients were admitted which was an advantage, as it allowed the Division and the personnel in the hospitals to become orientated in this new endeavor. During this interim, the State Legislature was in session and the enactment of laws to effectively deal with prostitution and venereal disease control was strongly recommended by public health committees, the

Army, Navy, and the U. S. Public Health Service, as well as other interested organizations. This receptive and alert Legislature provided the necessary laws, whereby Army, Navy, and civilian health authorities could better cope with problems of present-day prostitution and thus strike at the diseases which are rotting our communities and sapping the vitality of our men in uniform. Soon after the enactment of these laws the flow of infected women into the quarantine hospitals was accelerated and in a relatively short time, the hospitals were filled to capacity.

During the first nine months of operation (March through December inclusive) a total of 1,077 patients were released from the quarantine hospitals at Wakulla and Ocala of whom 708 were white (65.7%) and 369 colored (34.3%). (Table 7)

TABLE 7.—AGE DISTRIBUTION BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

Age Group	White	Colored	Total
0-9	0	0	0
10-14	11	10	21
15-19	271	156	427
20-24	249	128	377
25-29	99	36	135
30-34	38	17	55
35	40	22	62
All ages	708	369	1077

This table shows that 448 patients (41.5%) were below the age of nineteen and 825 patients (76.6%) were below the age of twenty-four. One hears much discussion these days regarding juvenile delinquency and perhaps the tables presented here will enlighten those who believe that all this disease is coming from the professional prostitute. It can be definitely stated that comparatively few professional prostitutes were admitted to the quarantine hospitals. This does not mean that the professional prostitute has been completely eliminated, but certainly her activities have been obscured by the amateur, who through misguided patriotism, has become promiscuous and subsequently infected with syphilis or gonorrhea, or both.

Table 8 shows that 355 patients (33%) were single and 683 patients (63.4%) were either married or had been married.

TABLE 8.—MARITAL STATUS BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

Status	White	Colored	Total
Single	185	170	355
Married	226	90	316
Separated	173	84	257
Divorced	99	11	110
Widowed	22	13	35
Unknown	3	1	4
Total	708	369	1077

Table 9 shows the age at which mothers and women of the future first gain their sexual experience.

TABLE 9.—AGE AT FIRST SEX EXPERIENCE, BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

Age	White	Colored	Total
—9	1	0	1
10	1	3	4
11	6	3	9
12	10	10	20
13	30	34	64
14	60	42	102
15	63	46	109
16	89	34	123
17	46	12	58
18	51	12	63
19	22	3	25
20	10	0	10
20 +	11	0	11
Unknown*	308	170	478

*Not asked.

In this table 478 are classified as unknown. Actually this information was not asked of these 478 girls, since the questionnaire from which this information is compiled was not conceived until some months after the hospitals had opened. Subsequent tables also have this classification. The information on sex experience, however, was obtained from sixty per cent of this total and reveals the fact that of 309 girls, 28.6% had sexual experiences before they attained the age of sixteen years, and 578 girls (53.4%) before the age of twenty.

Table 10 gives the data on the last school grade completed by these patients.

TABLE 10.—LAST SCHOOL GRADE COMPLETED BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

Grade	White	Colored	Total
None	5	11	16
First	5	1	6
Second	13	5	18
Third	10	11	21
Fourth	28	18	46
Fifth	30	38	68
Sixth	47	40	87
Seventh	81	33	114
Eighth	114	46	160
Ninth	74	50	124
Tenth	66	29	95
Eleventh	49	21	70
Twelfth	71	17	88
College 1 year	7	2	9
College 2 years	6	1	7
College 3 years	1	0	1
College 4 years	2	0	2
*Unknown	99	46	145

*Not asked.

It is the prevailing thought that this problem of infected delinquent girls is due almost entirely to the influx of transients. In Table 11, we see that 41.7% of the girls were born in Florida; 18.2% in Georgia and 10.9% in Alabama.

TABLE 11.—BIRTHPLACE AND RESIDENCE BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

State	White		Colored		Total		State	White		Colored		Total	
	Birth-place	Resi-dence	Birth-place	Resi-dence	Birth-place	Resi-dence		Birth-place	Resi-dence	Birth-place	Resi-dence	Birth-place	Resi-dence
Alabama	92	42	26	4	118	46	Nebraska	2	0	0	0	2	0
Arizona	1	0	0	0	1	0	Nevada	0	0	0	0	0	0
Arkansas	5	1	0	0	5	1	N. Hamp.	0	0	0	0	0	0
California	6	5	0	0	6	5	N. Jersey	1	1	2	1	3	2
Colorado	1	2	0	0	1	2	N. Mex.	0	1	0	0	0	1
Conn.	3	5	1	0	4	5	New York	15	11	3	1	18	12
Delaware	0	0	0	0	0	0	N. Car.	16	8	8	0	24	8
D. of Co.	3	1	1	0	4	1	N. Dak.	0	0	0	0	0	0
Florida	255	448	195	354	450	802	Ohio	19	12	0	0	19	12
Georgia	97	44	100	4	197	48	Okla.	5	2	0	0	5	2
Idaho	0	0	0	0	0	0	Oregon	0	0	0	0	0	0
Illinois	8	7	0	0	8	7	Penn.	12	3	1	0	13	3
Indiana	14	13	0	0	14	13	Rhode I.	2	0	0	0	2	0
Iowa	2	2	0	0	2	2	So. Car.	16	8	19	2	35	10
Kansas	4	1	0	0	4	1	S. Dak.	0	0	0	0	0	0
Kentucky	8	10	1	0	9	10	Tenn.	27	18	1	2	28	20
La.	5	5	1	0	6	5	Texas	11	9	1	0	12	9
Maine	2	1	0	0	2	1	Utah	1	0	0	0	1	0
Maryland	2	5	0	0	2	5	Vermont	0	0	0	0	0	0
Mass.	5	3	0	0	5	3	Virginia	5	10	1	0	6	10
Michigan	16	13	0	0	16	13	Wash.	0	0	0	0	0	0
Minn.	4	2	0	0	4	2	W. Va.	14	2	0	16	16	6
Miss.	11	4	5	1	16	5	Wis.	1	2	0	0	1	2
Missouri	4	2	0	0	4	2	Wyoming	1	0	0	0	1	0
Montana	0	0	0	0	0	0	Out. U. S.	6	0	0	0	6	1
							Unknown	6	1	1	0	7	1

When we consider the place of residence, it is noted that 802 girls (74.4%) gave Florida as their place of residence. Although no efforts were made to confirm this question definitely, residency in Florida was not considered unless the individual had lived here more than one year. It is of interest to note that girls were admitted from every state in the Union except fifteen. Table 12 presents the number of patients admitted from each county.

TABLE 12.—COMMITTING COUNTIES BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA

County	White	Colored	Total	County	White	Colored	Total
Unknown	0	0	0	Okaloosa	11	1	12
Alachua	1	1	2	Orange	29	34	63
Baker	0	0	0	Osceola	0	0	0
Bay	36	0	36	Palm Beach	3	11	14
Bradford	27	0	27	Pasco	1	0	1
Brevard	2	8	10	Pinellas	25	19	44
Broward	0	0	0	Polk	5	3	8
Calhoun	0	0	0	Putnam	2	1	3
Citrus	0	0	0	St. Johns	10	4	14
Clay	3	0	3	St. Lucie	4	6	10
Columbia	8	5	13	Santa Rosa	4	0	4
Dade	13	0	13	Seminole	20	8	28
DeSoto	1	1	2	Sumter	3	1	4
Duval	165	105	270	Suwannee	0	0	0
Escambia	101	20	121	Taylor	6	2	8
Franklin	2	0	2	Volusia	8	5	13
Gadsden	5	2	7	Wakulla	1	0	1
Hamilton	0	0	0	Walton	3	1	4
Hernando	0	1	1	Washington	0	0	0
Hillsboro	41	26	67	Flagler	0	5	5
Holmes	2	0	2	Okeechobee	0	0	0
Jackson	16	3	19	Charlotte	2	2	4
Jefferson	1	0	1	Dixie	3	1	4
Lafayette	0	0	0	Glades	0	0	0
Lake	6	0	6	Hardee	5	0	5
Lee	17	11	28	Highlands	6	0	6
Leon	61	42	103	Sarasota	11	15	26
Levy	1	1	2	Union	0	0	0
Liberty	0	0	0	Collier	0	0	0
Madison	1	0	1	Henory	1	0	1
Manatee	9	6	15	Gilchrist	0	0	0
Marion	23	14	37	Gulf	3	1	4
Monroe	0	0	0	Indian River	0	3	3
Nassau	0	0	0	Martin	0	0	0

The fact that some counties have contributed a large number of patients does not mean that the problem of delinquent, infected women is greater in these counties, but merely that these more populous counties have taken advantage of the facilities placed at their disposal. Duval, Leon, and Escambia Counties have contributed the largest number of patients, with Bay, Hillsborough, Orange, and Pinellas Counties next.

In Table 13 will be found the number of girls infected by the five venereal diseases, with a breakdown of the various diagnoses made on syphilis; whereas, Table 14 shows the predominant infections found in these girls.

TABLE 13.—DISEASE AND DIAGNOSIS, BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA.

SYPHILIS	White	Colored	Total
None	499	103	602
Primary	8	0	8
Secondary	17	12	29
Early Latent	150	220	370
Late Latent	25	29	54
Cardio Vascular	0	1	1
Central Nervous System	6	3	9
Congenital	3	1	4
GONORRHEA			
None	183	153	336
All Types	525	216	741
OTHER VENEREAL DISEASES			
None	706	334	1040
Chancroid	1	17	18
Granuloma	0	0	0
Lymphopathia Venereum	0	8	8
More than one "Other Venereal Disease"	1	10	11

TABLE 14.—TABULATION OF DIAGNOSIS AND COMBINATION OF DIAGNOSES BY RACE OF 1,077 GIRLS RELEASED FROM RAPID TREATMENT CENTERS AT OCALA AND WAKULLA.

Diagnosis Combination	White	Colored	Total
Syphilis Alone	73	104	177
Gonorrhea Alone	388	61	449
Other Venereal Diseases Alone	1	6	7
Syphilis and Gonorrhea	136	138	274
Syphilis and Other Venereal Diseases	0	12	12
Gonorrhea and Other Venereal Diseases	1	5	6
No Venereal Disease	109	31	140
Syphilis and Gonorrhea and Other Venereal Diseases	0	12	12

It will be noted that 140 of these girls fall under the classification of no venereal disease. Of this number, 14 girls left before diagnosis was established. The remainder of this group represents promiscuous girls who were admitted to the hospitals from counties where diagnostic facilities were not available.

It is interesting to note that 28% of the total patients had a combination of venereal diseases, 0.6% had granuloma, lymphogranuloma, or chancroid alone; 16% had syphilis alone, and 42% had gonorrhea alone, which further emphasizes the statement made earlier in this report that gonorrhea is considered more widespread than syphilis. The reason for this discrepancy is the fact that there is no known test for gonorrhea comparable to the blood test for syphilis. Many individuals with gonorrhea can and do produce repeated negative tests, but at the same time are highly infectious and continue spreading the disease to others. In the quarantine hospitals, the culture method of diagnosing gonorrhea was used, which is much more effective than spreads. Of the 1,077 patients treated in the hospitals at Ocala and Wakulla and released through December, 74% were discharged as cured, the remaining percentage being accounted for by run-aways, transfers to other institutions, or recommitments to jail. During the first nine months of operation, there were only 28 readmissions, or 2.6%. The hospitals located in Ocala and Wakulla have used an intensive form of treatment for syphilis; either the so-called five-day drip, which consists of giving 240 milligrams of an arsenical preparation in a suitable solution daily for five days, or the Eagle method, which consists of giving an ordinary dose of an arsenical preparation three times a week, plus an injection of bismuth for eight, nine, or ten weeks. Gonorrhea, as a rule, and the other venereal diseases were treated in the usual manner.

Another rapid treatment center is in operation at the Duval County Hospital in Jacksonville. This treatment center offers a different type of intensive treatment. This method consists of raising the patient's temperature to 106 degrees for a period of five hours by placing the patient in a heat cabinet. At the conclusion of the fever, a single calculated dose of an arsenical is given, after which the patient is removed from the cabinet and shortly thereafter allowed to go home. In this treatment center, male and female, white and colored, are treated, and since this center opened in June 1942, a total of 788 patients have been admitted for diagnosis and treatment. Table 15 gives the breakdown of the various diagnoses made and the number of white and colored patients examined or treated.

TABLE 15.—DISEASE BY DIAGNOSIS AND RACE OF 788 PATIENTS ADMITTED TO THE JACKSONVILLE RAPID TREATMENT CENTER JUNE 1942 THROUGH DECEMBER 31, 1943.

Diagnosis	White	Colored	Total
Primary Syphilis	32	116	148
Secondary Syphilis	37	144	181
Early Latent Syphilis	37	144	181
Late Latent Syphilis	6	7	13
Late Syphilis	5	3	8
C. N. S. Syphilis	41	33	74
Congenital Syphilis	5	27	32
Gonorrhea	97	11	108
No Venereal Disease	43	0	43
TOTAL	303	485	788

The results with this method are most encouraging and are being carefully evaluated by those in charge of this research project. The results compare most favorably with the other intensive treatment methods and with the standard technique. The intensive forms of treatment, however, have not stood the test of time as yet and those scientists who are studying these forms of treatment will not recommend universal adaptation until a longer period of observation is possible. These intensive forms of treatment are only used in the early stages of syphilis, and individuals reading about the newer forms of treatment should keep this in mind when they inquire whether or not they too can receive such treatment. The amount of treatment received with the new intensive methods has proven adequate in more than 85% of the cases. The patients receiving this type of treatment are not required to submit to additional treatments by the standard technique, but all patients are required to have follow-up blood tests at specified intervals. Health officers and members of the medical profession should keep this in mind when these patients present themselves for a check-up. Rendering additional treatment to these patients nullifies the results anticipated from the follow-up visits. Cooperation in this respect will aid in determining the value of intensive methods.

CASE HOLDING PROGRAM

To keep infectious venereal disease cases under medical care until they have been rendered non-infectious is a very important aspect of the venereal disease control program. With the intensive forms of treatment, patients are made non-infectious rapidly, but with the standard forms of treatment, patients must continue their weekly trips to the doctor's office or clinic until a minimum amount of treatment has been received. Graph 3 and Table 16 show the number of cases of venereal diseases under treatment in clinics by month in Florida for 1942 and 1943.

GRAPH 3. NUMBER OF CASES OF VENERAL DISEASES UNDER TREATMENT BY MONTH IN CLINICS IN FLORIDA IN 1942-43

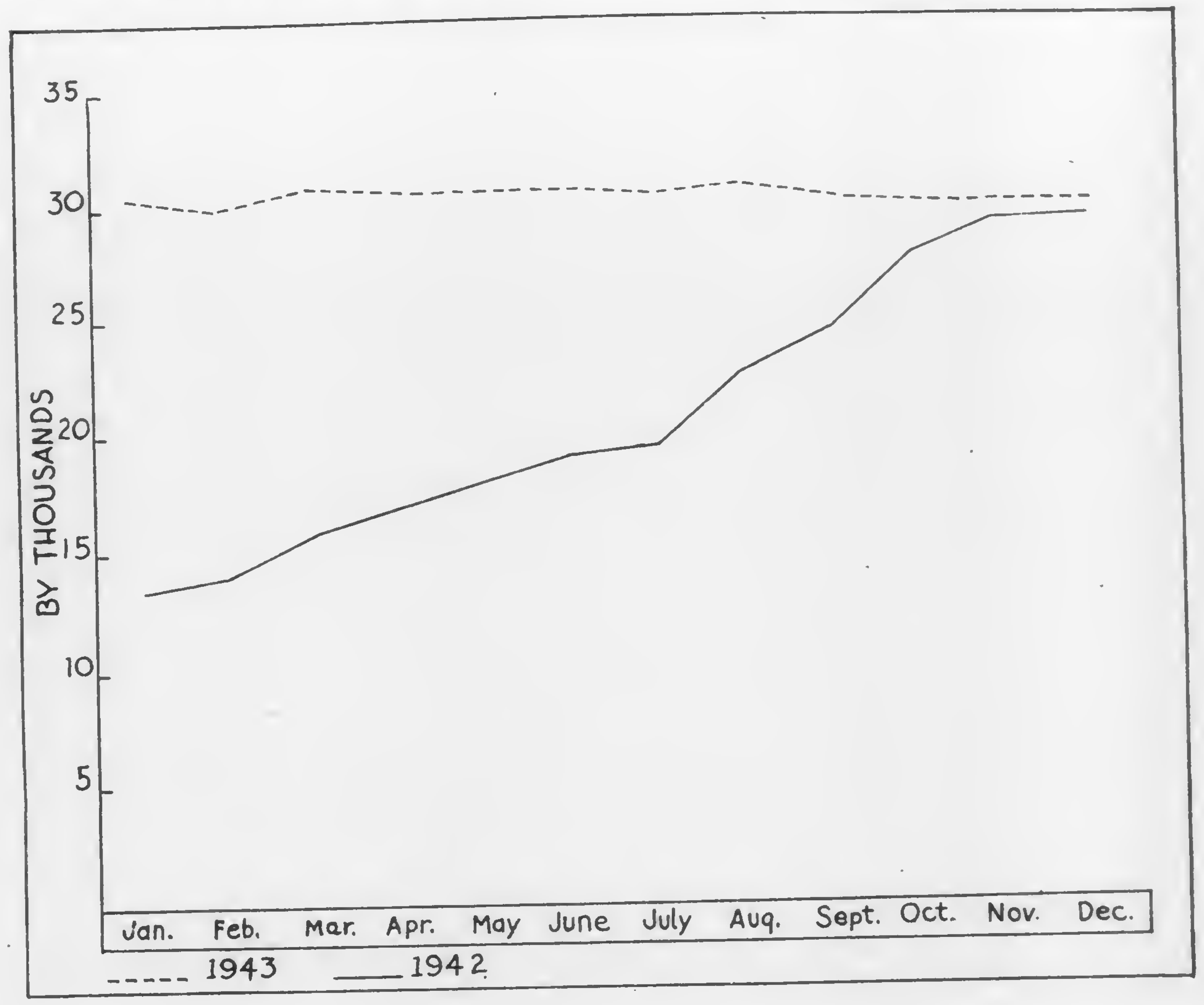


TABLE 16.—NUMBER OF CASES OF VENEREAL DISEASES UNDER TREATMENT IN CLINICS BY MONTH IN FLORIDA IN 1942-1943

Month	No. of cases of Venereal Diseases Under Treatment		Month	No. of cases of Venereal Diseases Under Treatment	
	1942	1943		1942	1943
January	13393	30218	July	19461	30710
February	14317	29956	August	22600	31412
March	15715	31311	September	24633	30472
April	16912	31156	October	27743	30008
May	18186	31255	November	29236	30076
June	19248	31296	December	29227	30000*

*Estimated.

One can see that as the program gained momentum during the latter half of 1942 and throughout 1943, the number of cases reporting for treatment each month practically remained a constant figure. This speaks very well for the patients and also displays the important role played by the lay investigators whose duty it is to return delinquent patients to the clinic. One might ask, "Why, since over

30,000 cases of syphilis have been reported for both 1942 and 1943, aren't a larger number of patients under treatment in the clinics?" The new cases discovered each month having syphilis merely replace those who have been transferred and those discharged as cured. We should soon approach the day when the number of patients discharged as cured far exceeds the number diagnosed as having syphilis. When that day arrives, we shall have just cause for optimism, but public health officials, law enforcement officers, and individual citizens must continue to wage unrelenting warfare until this insidious enemy has been permanently eliminated.

PREVENTION PROGRAM

In an effort to coordinate the activities of the many agencies endeavoring to reduce the incidence of venereal diseases in the armed forces and the civilian population, the Division for the first time scheduled a state-wide conference on venereal disease control in January to which were invited Army, Navy, Public Health Service and civilian health authorities, and other interested individuals. The conference received the enthusiastic endorsement of all present, and it was decided to hold subsequent conferences at quarterly intervals. At the July conference, the resolutions' committee recommended that an intensive educational program be instituted throughout the State and that a small steering committee, consisting of the State Venereal Disease Control Officer as Chairman and representatives chosen by him from the civilian and military agencies be appointed to meet at stated intervals to consider progress and plan new programs. This committee, with the writer as chairman, consisted of the following members: Sheriff D. C. Coleman, Miami; Mrs. Elizabeth Fretwell, Director, Bureau of Health Education, State Board of Health, Jacksonville; Mr. James Harper, Secretary Labor's Education and Protection Committee, West Palm Beach; Major Onis G. Hazel, V. D. Control Officer, Headquarters Third Air Force, Tampa; Mr. John Kilgore, Chairman, Information, Education and Morale Division, State Defense Council, Tallahassee; Miss Eunice Minton, State Welfare Board, Jacksonville; Dr. E. T. Sellers, Florida Medical Association, Jacksonville; Lt. Fred Turner, V. D. Control Officer, 7th Naval District, Miami; Judge Selden Waldo, State President, Junior Chamber of Commerce, Gainesville; Mrs. J. W. McCollum, Chairman, Federation of Women's Clubs Health Committee, Gainesville; Mr. Walter W. Argow, Executive Secretary of the Committee and Coordinator of the V. D. Educational Program, State Board of Health, Jacksonville. The first meeting was held in September, at which time it was agreed to proceed with the plans culminating in an educational campaign state-wide in its scope. This far outdistanced anything else previously considered or attempted in other States, and gave recognition to Florida as being the first State with a serious venereal disease problem to do something concrete about it. Subsequent details and arrangements for the educational program were handled by correspondence and during the latter part of October, the services of Mr. Robert P. Anderson, an information specialist, were loaned to the Division by the U. S. Public Health Service. Considerable preliminary work had been accomplished before his arrival and posters, pamphlets, and other informative literature designed. The educational campaign, however, had not as yet been presented to any of the communities expected to cooperate, and in this respect, Mr. Anderson made a quick tour of the State, instituting preliminary plans for the launching of the state-wide program on January 1st, 1944. Mr. W. W. Argow joined the Division's staff in November as coordinator of the educational campaign and organized wartime health committees in principal cities and communities throughout the State to carry on the educational campaign.

The Division of Venereal Disease Control solicited the aid of practically every known agency, club and organization. Dr. E. T. Sellers, Chairman of the Venereal Disease Control Committee of the Florida State Medical Association, wrote letters to each component medical society. Judge Selden Waldo, President of the Florida Junior Chamber of Commerce, wrote letters to each local chapter; Mr. George L. Burr, Chairman of the State Defense Council, directed each local defense council to cooperate; Dr. Henry Hanson, State Health Officer, requested cooperation from all the Army, Navy, Coast Guard, and Maritime Training Bases; Dr. Joseph Bolten, Medical Director, U.S.P.H.S., Liaison Officer, 4th Service Command, requested cooperation from the Surgeon General's Office of the Army, Navy, and Coast Guard; Dr. Charles McGill, Surgeon, U. S. Public Health Service, Health Consultant for the Maritime Commission, requested all shipyards in the State to cooperate. The State Pharmaceutical Association was contacted and pharmacists are cooperating with the program. Additional organizations contacted by this Division include, among others, the Business and Professional Women's Clubs, State-wide Public Health Committee, Florida Association of Social Workers, Florida League of Municipalities, Federation of Women's Clubs, American Social Hygiene Association, Florida Congress of Parents and Teachers, fifteen radio stations, twenty-five leading newspapers, all health departments and venereal disease clinics, and state, county, and city governments. The Hon. Spessard L. Holland, Governor of Florida, has been most cooperative in this program and proclaimed the month of January as Venereal Disease Control Month. The legal aspects of venereal disease control were covered by a very timely and appropriate article in the Florida Law Journal by Lewis W. Petteway, Assistant Attorney General for the State of Florida. Eight radio forums were prepared, which are being used by the cooperating radio stations. A series of thirty-five newspaper mats was prepared and sponsored by business organizations throughout the State for publication in local newspapers. One hundred twenty-five outdoor billboards were sponsored by city governments or civic organizations. In some areas, the cities were "bombed" with 3x5 leaflets, which in other cities are being used to stuff utility bills and pay roll envelopes. Window displays, posters, pamphlets, leaflets, and all sorts of educational material have been prepared for distribution. Civilian Wartime Health Committees (white and colored) have been organized in most cities and communities with an executive board, and the following divisions: newspaper, radio, film, speakers, posters, and billboards.

Another feature of the educational campaign will be the training of neighborhood health wardens and civilian V. D. Control Officers. Through the cooperation of the local Defense Council and the local health officer, block leaders, air raid wardens, casualty station aids, or other volunteers who wish to cooperate in this important war job will receive a series of informative lectures, after which a suitable tag and certificate of recognition signed by the State Health Officer and Mayor will be awarded. Health Wardens will then be supplied with all necessary informational material and their duties will be as follows:

1. To spread information in each neighborhood by word of mouth and by pamphlets and posters on the serious effects of the diseases, if allowed to go untreated, and the ease with which they can be treated by competent personnel.
2. To encourage everyone to have a blood test for syphilis and a smear test for gonorrhea.
3. To direct people to visit competent physicians at the first sign of any illness; or, if unable to pay, to visit the local health clinic.
4. To discourage self-diagnosis and medication and the use of patented "cure-alls" or the recipes of quacks or herb-root doctors.

5. To emphasize to all the importance of being faithful in their treatments, and thus help the local health officer maintain or regain the cooperation of those who may be delinquent.
6. To aid in the general promotional campaign as organizers or members of various committees, gathering facts on the local situation, stimulating public officials to greater activity, securing press, radio and movie coverage of the story of the ravages of venereal disease in their towns.
7. To gear into, assist and strengthen the various existing programs aimed at preventing or reducing promiscuity, youth delinquency and crime, through repressive and substitutive measures, and to develop programs where none is now in action.

The control of venereal diseases is a medical, social, and economic problem. Trained investigators can trace the infected; physicians can treat and cure them; police can suppress prostitution and other forms of promiscuity which spread disease, but syphilis and gonorrhea will continue unless the people in every town, city, and county are made aware of the seriousness of these diseases, and offer their wholehearted cooperation on various control efforts. No one person, and certainly no central committee, can carry out this program. This job requires the help of every person and organization in each community. Florida has received considerable adverse publicity resulting from the high incidence of venereal diseases. It is, therefore, the duty of every citizen to help erase this blemish from the State.

CONCLUSION

In reviewing the above expansion of the Venereal Disease Control Program in Florida, we feel it timely to give due recognition to the men who formerly directed its activities: Dr. L. C. Gonzalez, who organized the Division in 1938 and resigned in May 1942 to enter private practice; and Dr. Wilson T. Sowder, Surgeon, U. S. Public Health Service, under whose direction the present staff had the privilege of working.

The writer has directed the Division since June 7, 1943; therefore, it is only proper that credit for the V. D. Control Program now operating so effectively in this State be shared with these predecessors. Most of the charts, tables, and maps presented in this report show the work done by these two men. Recognition must also be given to the important work performed by all health officers, U. S. Public Health Service Officers, assigned to the State, and private physicians, all of whom have contributed to the success of the V. D. Control Program. All other Bureaus of the State Board of Health have been most cooperative with the Division of V. D. Control. Special commendation should be given to the Bureau of Health Education and its staff for the valuable assistance received in the preparation of not only articles in *Health Notes,* but also for preparation of news articles, posters, pamphlets, and other material used in the educational program.

In spite of the obstacles and difficulties encountered during the past year, the "esprit de corps" remains intact and with the assistance of the many prominent citizens and civic organizations backing the educational and prevention program, we believe that Florida will soon be able to point with pride to the successful elimination of syphilis and gonorrhea.

TABLE 17.—DIVISION OF VENEREAL DISEASE CONTROL ANNUAL REPORT—1943.
Cases of Syphilis Reported in 1943 According to Stage of Infection, Pregnancy Status, Race and Sex, Source of Reference and Age Groups, by Counties and for State.

County	By Stage of Infection										Pregnancy	By Race & Sex						Source of Ref.		By Age Group						
					Late							White		Colored						**						
	Primary	Secondary	Early Latent	Late Latent	C. N. S.	Other	Cong.	Not Stated	Total	Rate		M	F	M	F	Not Stated	Total	* Clinic or Inst.	Priv. M.D.	0–9	10–19	20–29	30–39	40–49	50–Over	Total
Alachua	26	10	358	323	5	4	15	43	784	......	11	25	28	375	331	25	784	672	112	30	113	286	243	90	22	784
Baker	0	2	1	6	0	0	1	35	45	......	1	4	3	17	19	2	45	44	1	6	10	8	10	5	6	45
Bay	1	23	203	290	0	1	0	35	553	......	5	79	55	259	148	12	553	489	64	3	59	282	170	31	8	553
Bradford	7	11	84	88	3	0	0	6	199	......	1	19	31	65	83	1	199	186	13	3	22	85	63	16	10	199
Brevard	10	23	107	198	2	19	19	41	419	......	5	9	9	224	170	7	419	347	72	18	50	128	128	68	27	419
Broward	21	33	340	248	1	0	19	80	742	......	21	30	13	374	305	20	742	654	88	21	101	315	196	70	39	742
Calhoun	0	0	32	14	1	0	0	1	48	......	0	4	2	18	23	1	48	47	1	0	6	24	11	6	1	48
Charlotte	4	1	14	34	1	0	3	8	65	......	2	4	1	33	18	9	65	56	9	9	8	24	14	7	3	65
Citrus	4	13	50	82	0	0	1	20	170	......	4	1	2	49	106	12	170	66	104	4	24	38	44	28	32	170
Clay	4	0	44	52	0	0	4	4	108	......	1	7	3	53	42	3	108	106	2	5	7	40	31	16	9	108
Collier	3	0	6	13	0	1	0	12	35	......	0	0	0	21	12	2	35	16	19	3	2	9	10	10	1	35
Columbia	7	16	294	366	0	0	12	19	714	......	2	17	10	329	348	10	714	189	525	28	68	255	183	117	63	714
Dade	332	342	1,062	2,038	52	61	68	504	4,459	......	31	441	240	2,151	1,384	243	4,459	3,191	1,268	208	393	1,664	1,371	587	236	4,459
DeSoto	0	1	45	95	0	1	8	16	166	......	2	16	11	73	60	6	166	99	67	15	21	52	50	21	7	166
Dixie	2	1	79	131	0	1	1	0	215	......	6	11	6	91	106	1	215	210	5	2	18	68	74	41	12	215
Duval	251	347	1,285	2,539	171	57	116	1,448	6,214	......	85	659	511	2,819	2,106	119	6,214	5,126	1,088	508	559	2,148	1,777	878	344	6,214
Escambia	120	75	340	206	21	15	13	2	792	......	13	94	67	242	383	6	792	656	136	19	161	389	166	48	9	792
Flagler	4	4	40	41	1	0	4	0	94	......	0	0	0	48	40	6	94	88	6	3	19	28	18	14	12	94
Franklin	13	26	40	34	1	0	2	1	117	......	2	9	11	40	52	5	117	111	6	9	19	49	26	9	5	117
Gadsden	19	6	93	136	0	1	9	35	299	......	10	5	13	134	123	24	299	240	59	18	49	111	86	20	15	299
Gilchrist	0	0	1	1	0	0	0	2	4	......	0	1	0	1	0	2	4	4	0	2	0	1	1	0	0	4
Glades	1	3	7	6	0	1	0	0	18	......	1	2	1	7	8	0	18	18	0	2	3	6	6	0	1	18
Gulf	1	10	44	66	2	0	1	19	143	......	4	3	2	61	69	8	143	118	25	4	17	56	40	21	5	143
Hamilton	0	0	3	0	0	0	0	0	3	......	0	0	0	2	1	0	3	0	3	0	1	2	0	0	0	3
Hardee	16	0	5	10	2	0	1	2	36	......	1	5	10	8	12	1	36	15	21	3	3	8	16	4	2	36
Hendry	6	12	65	93	1	2	1	1	181	......	3	3	5	101	69	3	181	180	1	6	17	78	53	19	8	181
Hernando	3	8	34	62	0	0	5	30	142	......	0	3	3	53	81	2	142	100	42	3	15	46	42	17	19	142
Highlands	54	8	71	112	3	0	11	40	299	......	1	48	51	115	71	14	299	246	53	28	40	112	82	29	8	299
Hillsborough	229	95	658	1,678	22	14	50	174	2,920	......	15	317	215	1,300	1,005	83	2,920	2,282	638	105	267	1,091	955	375	127	2,920
Holmes	2	18	9	8	0	0	0	14	51	......	0	10	4	25	10	2	51	44	7	11	4	11	18	2	5	51
Indian River	12	3	140	109	0	0	5	10	279	......	0	4	3	132	134	6	279	250	29	15	33	90	79	34	28	279
Jackson	5	0	95	93	0	0	15	3	211	......	6	17	11	88	92	3	211	211	0	10	55	84	40	13	9	211
Jefferson	25	9	113	24	0	0	5	25	201	......	9	3	4	92	93	9	201	178	23	14	23	80	41	25	18	201
Lafayette	0	0	5	5	0	0	0	4	14	......	0	0	0	9	1	4	14	9	5	6	0	2	5	1	0	14
Lake	10	16	106	183	0	0	3	62	380	......	5	12	18	168	152	30	380	258	122	29	43	111	117	56	24	380

(* Includes unknown Source of Reference)
(** " " Age)

TABLE 17.—DIVISION OF VENEREAL DISEASE CONTROL ANNUAL REPORT—1943.—(Cont)
Cases of Syphilis Reported in 1943 According to Stage of Infection, Pregnancy Status, Race and Sex, Source of Reference and Age Groups, by Counties and for State.

County	By Stage of Infection											By Race & Sex						Source of Ref.		By Age Group						
					Late							White		Colored												
	Primary	Secondary	Early Latent	Late Latent	C. N. S.	Other	Cong.	Not Stated	Total	Rate	Pregnancy	M	F	M	F	Not Stated	Total	* Clinic or Inst.	Priv. M. D.	** 0–9	10–19	20–29	30–39	40–49	50–Over	Total
Lee	14	6	105	142	1	4	8	6	286	......	0	17	9	180	80	0	286	271	15	7	24	107	92	46	10	286
Leon	20	12	243	141	7	5	15	7	450	......	0	5	13	235	194	3	450	427	23	5	77	212	116	31	9	450
Levy	2	20	49	40	0	0	5	36	152	......	0	3	2	77	45	25	152	148	4	29	17	51	37	14	4	152
Liberty	0	0	5	2	0	0	0	0	7	......	0	2	0	2	3	0	7	7	0	0	1	4	0	1	1	7
Madison	10	25	235	185	1	0	12	8	476	......	2	6	4	200	261	5	476	468	8	23	51	159	155	57	31	476
Manatee	8	10	85	94	1	3	16	1	218	......	5	13	20	108	70	7	218	216	2	3	30	105	47	20	13	218
Marion	17	28	218	670	2	0	35	56	1,026	......	7	44	24	478	437	43	1,026	856	170	39	86	355	325	158	63	1,026
Martin	2	4	0	6	0	0	0	83	95	......	0	3	1	31	13	47	95	91	4	5	6	24	25	27	8	95
Monroe	18	10	123	141	1	1	3	11	308	......	2	34	27	175	65	7	308	301	7	10	27	119	116	29	7	308
Nassau	4	7	14	50	0	1	11	114	201	......	8	14	2	101	81	3	201	180	21	24	14	73	51	23	16	201
Okaloosa	53	16	57	36	2	0	1	6	171	......	3	28	11	92	40	0	171	168	3	6	16	100	27	14	8	171
Okeechobee	2	1	9	57	0	1	1	1	72	......	0	1	2	32	37	0	72	70	2	2	4	15	24	16	11	72
Orange	43	24	298	360	6	33	22	64	850	......	12	69	46	444	260	31	850	784	66	68	82	321	270	87	22	850
Osceola	1	2	4	95	0	1	10	0	113	......	0	2	1	56	54	0	113	2	111	1	9	25	26	32	20	113
Palm Beach	81	50	531	509	5	6	11	81	1,274	......	12	44	30	623	508	69	1,274	1,092	182	40	125	530	399	135	45	1,274
Pasco	10	11	49	58	1	4	2	40	175	......	2	20	6	69	55	25	175	81	94	3	16	64	61	25	6	175
Pinellas	15	80	216	453	9	46	33	75	927	......	4	103	60	403	327	34	927	722	205	49	88	266	303	143	78	927
Polk	27	44	273	672	4	3	41	71	1,135	......	14	68	64	627	339	37	1,135	922	213	45	136	413	387	118	36	1,135
Putnam	11	1	173	113	2	2	10	8	320	......	3	8	3	171	132	6	320	291	29	8	53	103	87	42	27	320
St. Johns	15	3	102	78	1	0	7	7	213	......	1	12	6	78	113	4	213	204	9	7	31	69	53	36	17	213
St. Lucie	33	5	128	160	0	0	5	8	339	......	2	8	8	195	125	3	339	337	2	16	37	129	105	34	18	339
Santa Rosa	2	4	25	17	3	1	2	1	55	......	0	14	9	16	16	0	55	49	6	8	4	19	21	2	1	55
Sarasota	13	6	44	96	3	4	5	10	181	......	0	19	7	80	70	5	181	175	6	16	19	70	55	15	6	181
Seminole	3	17	148	366	1	2	38	14	589	......	14	10	18	281	265	15	589	545	44	73	72	210	184	40	10	589
Sumter	12	16	71	39	21	1	17	13	190	......	1	17	6	82	78	7	190	150	40	18	22	67	40	27	16	190
Suwannee	23	4	122	212	0	0	11	5	377	......	4	6	8	165	193	5	377	370	7	2	40	121	96	79	39	377
Taylor	2	1	65	40	0	0	1	18	127	......	1	12	3	65	38	9	127	99	28	64	7	29	19	7	1	127
Union	2	10	1	0	0	0	0	7	20	......	0	2	0	16	1	1	20	1	19	7	1	8	4	0	0	20
Volusia	19	78	174	327	2	0	24	36	660	......	5	29	24	344	257	6	660	591	69	48	72	244	192	70	34	660
Wakulla	25	7	43	22	0	0	5	9	111	......	5	9	36	34	28	4	111	110	1	10	25	56	14	6	0	111
Walton	0	0	6	4	0	0	0	36	46	......	1	9	5	13	19	0	46	46	0	15	13	11	7	0	0	46
Washington	17	41	36	28	0	0	2	17	141	......	0	16	13	49	63	0	141	139	2	7	19	42	44	18	11	141
State Hosp.	1	1	17	51	110	1	2	0	183	......	1	51	22	47	38	25	183	183	0	2	5	25	46	51	54	183
Camp Blanding	164	66	30	24	24	2	4	2	316	......	0	115	0	199	0	2	316	316	0	14	58	201	37	6	0	316
Naval Air Station	30	2	1	0	0	0	0	3	36	......	0	19	0	17	0	0	36	36	0	1	14	17	4	0	0	36
Out of State	4	2	11	6	3	12	1	22	61	......	1	33	9	17	1	1	61	55	6	2	7	10	11	14	17	61
Gov't. Hosp.	0	0	0	17	12	21	0	19	69	......	0	12	0	54	0	3	69	69	0	8	0	0	2	25	34	69
Fla. T. B. San.	0	0	0	2	0	0	0	0	2	......	0	0	0	1	1	0	2	2	0	0	0	1	1	0	0	2
Quarantine Hosp.	6	27	200	33	2	1	1	1	271	......	5	0	111	0	155	5	271	271	0	3	96	136	28	5	3	271
State Prison	5	0	142	90	1	0	0	0	238	......	0	37	3	162	36	0	238	238	0	0	18	79	78	53	10	238
Florida	1,906	1,757	9,926	14,820	514	333	753	3,592	33,601	......	362	2,776	1,956	15,596	12,155	1,118	33,601	27,589	6,012	1,838	3,652	12,371	9,755	4,184	1,801	33,601

MERIT SYSTEM COUNCIL

By ANGUS LAIRD, Merit System Supervisor

The chief problem confronting the Merit System Office during the year has been that of finding personnel for the many vacancies within the agencies.

It has been impossible to locate fully qualified persons for vacant positions in the fields of sanitation, public health nursing, and laboratory work, but under the circumstances standards have been fairly well maintained. Emergency in-service training programs for sanitary officers and laboratory assistants and technicians have been developed, which permitted these branches to continue to function with some degree of efficiency. The regular training program of the Bureau of Public Health Nursing has been conducted on a reduced scale, and a number of nurses have been away at school during the year.

The shortage of experienced help and the turn-over of personnel in the clerical and other non-professional and non-technical fields have also seriously handicapped the operating agencies. In all instances, the Merit System Office has endeavored to recruit persons for vacancies, and has succeeded in filling most of them.

During the year the Merit System Council voted to discontinue open, competitive examinations to establish registers from which permanent appointments may be made during the war. The only such examination announced and held during the year was for the classification of Maintenance Man. However, the Supervisor was authorized to give qualifying examinations for sanitary and nursing classes, and preparations for these examinations are now being made.

Promotional examinations were given during the year for the following classes: Senior Clerk, Registration Inspector, and Chief Clerk.

In review of the classification and compensation plans by the U. S. Public Health Service was completed in the early part of 1944, and revisions of the plans along the lines suggested have been made. The revised classification plan has been forwarded to the U. S. Public Health Service for further review. The compensation plan is also undergoing revision and copies of the revised plan will be made available for distribution to all offices within the near future.

A number of amendments to the Merit System Rules were adopted during the year. At the most recent meeeting of the Council, the

Supervisor was authorized to have a new edition of the rules published in the near future.

Fortunately, there have been no appeals for hearings in cases of dismissals or other causes. In one instance, the Merit System Supervisor attended a public meeting of the Hillsborough County Board of Commissioners to discuss the status of the local supervisor of public health nursing in the old county health unit, who was replaced in the new combined city-county unit. The Merit System Supervisor explained that the former nursing supervisor had not been given permanent appointment to her position, although she had been employed prior to November 1, 1934, but if she wished to appeal against her release by the Health Unit, the Merit System Council would grant her a fair and impartial hearing.

After the meeting a position in another county paying the same salary was offered the former supervisor, but at her request she was given an extended leave of absence due to illness. The Merit System Supervisor is of the opinion that her failure to give complete satisfaction in her position was due to her health. The existence of the Merit System and the fact that she had the right to appeal to the Council prevented her arbitrary dismissal after many years of service, at a time when such treatment would have been cruel and would probably have been disastrous to her mental and physical health.

The Council held two meetings during the year, one on November 7, and the other on May 7. Due to the transportation difficulties and the fact that Council members are extremely busy with their own business and professional affairs, the Supervisor has endeavored to hold the number of meetings to a minimum. At the meeting of the Council on May 7, Dr. W. G. McLeod was elected Chairman to succeed Dean Walter J. Matherly, who has been replaced by Dr. Walter Jones of Miami as a member of the Council.

The financial report for the year will not be available until after the end of the fiscal year on June 30. However, although our budget for the year provided $7220 for operation of the Merit System, the total expenditures will probably not exceed $5000.

PUBLIC HEALTH NURSING

By RUTH E. METTINGER, R. N., Director

The nursing service has undergone a terrific turnover during the past year. According to reports from some of the other states, however, Florida has not felt the dearth of nurses so much, in comparison, as many of the vacancies have been filled either by retired nurses or by wives of service men. All appointments have been on an emergency basis. An effort has been made to maintain Public Health Nursing standards, and even though nurses without public health training or experience have been employed, they have been placed for the most part under local nursing supervision. Those showing an aptitude for the work have been given scholarships. Two nurses were sent to Simmons College; two to George Peabody College for Teachers; four to the University of North Carolina; and two to the Medical College of Virginia. These nurses were replaced by temporary appointees.

On January 1, 1944, there were four vacancies in the County Health Units and no vacancies on the State Consultant staff. Few of the County Health Units have sufficient public health nurses to meet the need as in many counties the population has been doubled. In many instances the nursing staffs have been increased.

To conserve travel and save duplication of effort, the units were divided into Districts and assigned to three of the consultants equally to assist in developing a generalized nursing service. The generalized consultants visited the County Health Units upon invitation and remained from one week to one month or longer, depending upon the need. During these visits assistance was given either in reorganizing the program or smoothing out its operation. Much time was spent in counties where nurses with no training in Public Health were assigned. It was gratifying to learn from one of the generalized consultants that one of the untrained public health nurses was doing an especially fine job. This is the only instance where a nurse was placed in a county without daily supervision. Due to the volume of work, which has increased because of the present emergency, the generalized consultants have assisted the nurses in selection of cases. Much of the staff nurses' time has been given to additional clinics. Through the consultants, clinic nurses have been added to the staff relieving the public health nurse of the physical mechanics, allowing her to interview patients and spend more time in the field. The selection of nurses for scholarships has been largely on the recommendations made by the consultants.

Four of the consultants remained as specialists due to the problems in the unorganized counties in their particular fields:

The State Tuberculosis consultant has devoted much of her time to investigating rejected inductees suspected of having active cases as reported through the Selective Service Board; instructing nurses in the study of tuberculosis; explaining the procedures of the Mobile X-Ray Unit of the State Board of Health and the follow-up on cases detected; investigating all tuberculous cases reported from various sources; lecturing to classes in institutions and participating in institutes.

Due to the increase of V. D. Clinics in unorganized counties, an additional State Staff Nurse was added to supervise these clinics under the directorship of the Division of Venereal Disease Control. Thirty of the unorganized counties were visited in the interest of V. D. Control clinics. Occasionally city and county officials were contacted with the idea of promoting the clinics locally, but by far the majority of visits were for the purpose of instructing and supervising in Venereal Disease Control. Perhaps the most important part of the work was improving the technique employed in these hastily set up clinics. Important needs encountered were for better education of the public about the venereal diseases and other communicable diseases and for more adequate transportation of the case load from rural areas to the clinics. The former has been brought to the attention of the public by the recently inaugurated venereal disease education campaign, but transportation lacks a general solution. Frequent change of personnel in clinics has hampered smooth operation. It has been necessary to change nurses and in many instances difficult to find a graduate nurse in the county. Where possible, the nurse employed by the County Commissioners or the School Board has been asked to assist with the clinics and her salary has been supplemented by the State Board of Health.

With the development of the Medical Center at Valpariso, a nurse-midwife was assigned to this area. The State Midwife Consultant spent two months assisting with the development of the program. A series of Mothers' Classes was organized in the Niceville and Fort Walton areas. Thirteen expectant mothers were enrolled; almost all were primiparas in their 'teens. Seventy-seven demonstrations pertaining to maternity and infant care were given to the Unit nurses and midwives. An effort is being made to eliminate the old type of "granny" midwife. Six were given honorable discharges, thereby removing a potential menace from the counties in which they serve.

The State Negro Midwife Teacher gave direct service to the midwives in completing their 1943 licensing and registration; giving lectures and demonstrations on the conduct of normal home deliveries; observing midwives in the homes and instructing them how and when to use the sterile articles in the bags and the obstetrical packages with which they are supplied; investigating the practice of non-licensed midwives. In all counties visited, the work was designed not to teach the midwives by lectures but rather to illustrate the benefits resultant from effective use of the standard equipment recommended by the State Board of Health when on deliveries and postpartum visits. This Midwife Teacher reports that the problem to which the better midwives are seeking a solution is that of securing adequate medical assistance with complicated deliveries or hospitalization.

An outline for Public Health Nursing lectures was made for several of the hospitals. The nursing staff assisted in giving these lectures.

Staff education has been somewhat curtailed due to the transportation problem. When feasible, special representatives have assisted County Health Units with the establishment of Child Spacing Clinics. Miss Ethel Peters, representative of the Planned Parenthood Federation of America, conducted a series of institutes outlining the policies of the organization, the reasons for such a service, and the nurses' part in the program.

A series of Orthopedic Conferences has been held by the State Orthopedic Nursing consultant. These conferences will continue through the year 1944.

The Emergency Health and Sanitation Activities nurses have filled a great need. These nurses have assisted greatly with the nursing program in the three Rapid Treatment Centers.

Frequent visits have been made to the two F.P.H.A. Infirmary projects at Panama City and Key West. While these are under the U. S. Public Health Service, the State Board of Health Nursing Service has assumed some of the responsibility of securing nurses and accompanying the representatives of the U. S. Public Health Service to these areas.

As State Chairman of the State Nursing Council for War Service, a meeting was attended in Chicago at which time outlines of the Procurement and Assignment Service and the U. S. Cadet Nurse Corps program were explained. A program was arranged for the State Nurses' Association meeting in Tampa. Participating in this program were Miss Helen Bean, Senior Public Health Nursing Consultant of the U. S. Public Health Service in New Orleans, and Miss Mary J. Dunn, Senior Public Health Nursing Consultant of the U. S. Public Health Service in Washington. This program revolved around the need for nurses, the securing of inactive nurses, Procurement and Assignment, and the U. S. Cadet Nurse Corps.

MALARIA RESEARCH

MARK F. BOYD, M.D., Director

Station for Malaria Research
Rockefeller Foundation International Health Division
Tallahassee, Florida

COMPLETED STUDIES AND PAPERS

Typescripts of the following papers were submitted to the Home Office, viz.

112. Mark F. Boyd. "Present Day Problems of the Malaria Infections".
This paper was prepared at the request of the sub-committee on Tropical Medicine of the National Research Council, and is to form part of a symposium on tropical diseases in the Journal of the American Medical Association.

113. Mark F. Boyd and S. F. Kitchen. "Renewed Clinical Activity in Naturally Induced Vivax Malaria".

WORK IN PROGRESS

During the course of the year a series of experiments were conducted at the request of the office of the Surgeon General of the U. S. Army, to ascertain the results to be expected from the employment, under various circumstances, of atabrine in the suppressive treatment of malaria. Two experiments were completed and the results communicated to the authorities interested. Two others are still under way.

S. F. Kitchen is completing a statistical study of the clinical reactions to infection with P. vivax, based on our extensive series of clinical records. Particular consideration was given to the paroxysms and other component parts, variations in the time incidence, and variations in the character of the febrile reactions under different circumstances.

In collaboration with Miss Putman, Mark F. Boyd is conducting a statistical study of the density of parasites during the primary patent period of vivax infections.

A histological study of sporozoites in tissue at different intervals after inoculation is under way. Serial sections of excised tissue have been prepared and now await staining and protracted scrutiny.

No further successful inoculations were secured with infected blood that had been rapidly frozen and stored for varying periods at 90°F. The results have been so undependable that this line of work has been discontinued.

It is apparent that our program of studies has been materially curtailed. This is due to a variety of causes, all related to the prevailing situation. These include a vacancy on the medical staff which we are unable to fill, to additional work arising from the collection and preparation of teaching material forwarded to the Army Medical School, to active participation in the instruction of military personnel, both in Tallahassee and the Army Medical School, and to absences necessitated by committee meetings and consultative responsibilities.

MALARIA THERAPY

During the year the malaria therapy service at the Florida State Hospital was the immediate responsibility of S. F. Kitchen who has made visits to the institution.

The following inoculations were made on the service during the year:

CLASS	STATUS PATIENT WITH CORRESPONDING SPECIES OF PARASITES	P. vivax			P. falciparum			P. malariae		
		Takes	Failure	Pending	Takes	Failure	Pending	Takes	Failure	Pending
Natural (sporozoites)	Primary	43	1	0	19	8	0	0	0	0
	Reinoculation after previous failure	1	0	0	0	0	0	0	0	0
	Reinoculation after previous take	0	0	0	0	0	0	0	0	0
Artificial (trophozoites)	Primary	7	0	0	19	4	0	15	0	0
	Reinoculation after previous failure	0	0	0	3	0	0	0	0	0
	Reinoculation after previous take	0	0	0	1	0	0	0	0	0

A total of eleven private patients were referred for inoculation by physicians of Jacksonville, Tampa, Bradenton, Coral Gables and Century, Florida, as well as of Finney General Hospital, Thomasville, Georgia.

The McCoy strain of *P. vivax* has been carried on through human-anopheline passages 71 to 76 inclusive. We continue the propagation of the Trinidad strain, but the Sikes strain was dropped during the year.

Our routine inoculations with *P. falciparum* continue to be done with the Costa strain, although the Trinidad strain of this species has been conserved at propagation level. Another strain of P. falciparum, presumably of African origin, has been secured from an aviation officer at Mabry Field.

We have continued the utilization of P. malarise in the secondary inoculation of patients who did not have adequate therapeutic attacks as a result of inoculation by either of the other species. We continue to conserve the Glisson, Tampa and Trinidad strains of these species.

A peculiar event of the year has been the discovery in five white male patients, of what appear to be unsheathed filariae. Only a single smear from each patient has been positive, and only a single worm observed in each entire smear.

INSECTARIES

Unusual difficulty in insectary operation was encountered during the year, and on one occasion the situation was critical.

The first trouble began during May with an extraordinary mortality of 3rd and 4th instar larvae, which we were unable to check until June. We at first supposed we were dealing with an infectious disease, but all procedures designed to evade the supposed infection were fruitless. The situation did not improve until we discontinued the use of the city water in the rearing pans. Since over-chlorination of the city water was noted about the time our trouble began, we are suspicious of this as its cause. Further trouble in October was due to overheating of a water-bath. The appearance of dead larvae is not uniform. At least two types of post-mortem aspect are commonly noted in our pans. In one the dead larvae are greatly relaxed and extended, with a length perhaps nearly 50 per cent increased over that in life, and a decidedly pink color to the thorax and abdomen. These usually quickly sink to the bottom. In the other, more recently observed in our pans, the dead larvae are markedly contracted, perhaps not over two-thirds of the normal length, and distinctly blackened in color. They remain floating on the surface and appear as if all the hairs are lost.

The diminished number of adults in the colony reduced egg production to the point where all available eggs were required for hatching and we were consequently obliged to discontinue the shipment of ova to the station of the U. S. Bureau of Entomology at Orlando, and during August were unable to furnish infected mosquitoes to the Army Medical School.

The T. V. A. strain of *A. quadrimaculatus* was discontinued.

INSTRUCTION

The following persons, apart from those in military classes, have spent one or more weeks at the station for the purpose of receiving instruction in malariology: Dr. Ruy Penna Ponde, Commonwealth Fund Fellow, Brazil; Mr. Leon Price, Technician, U. S. Engineers Corps; Dr. Gilberto Gõmez, Commonwealth Fund Fellow, Dominican Republic; Dr. R. D. Alley, study grant, I. H. D.; Mr. Paul Weinstein, Parasitologist, Florida State Board of Health; Dr. David P. Earle, Department of Medicine, New York University; Dr. Luis F. Thomen, Fellow P. S. San. Bur., Dominican Republic; Mr. McDermott, Technician, Florida State Board of Health; Dr. Alberto Valderrama, Fellow, Pan Amer. San. Bur., Peru; Lieut. Joe Risser, M. C., A. U. S. Lab. 4th Service Command; Dr. Cermen Ortiz, I. H. D. grant, Mexico; Dr. Velez Velez, Pan Amer. San. Bur., Colombia; Dr. Gabriel Uribe, Pan Amer. San. Bur., Colombia; Dr. Albert Miller, Dept. Trop. Med. Tulane; Dr. R. E. Heal, Merck and Co.; Dr. Ernesto Marroquin, Coordinator Inter-American Affairs, Guatemala.

During the year we received twelve military classes, each for the period of a week, as participation of the station in the three weeks course given under the auspices of the Florida State Board of Health. The attendance of officers under orders has been as follows:

		OFFICERS		
Series Number	Week of	Army	Navy	Total
3	January 11	12	0	12
4	February 1	9	6	15
5	February 22	10	0	10
6	March 15	9	6	15
7	April 12	10	6	16
8	May 17	8	6	14
9	June 28	10	4	14
10	July 19	11	6	17
11	August 16	7	10	17
12	September 20	10	5	15
13	October 17	10	0	10
14	November 22	9	5	14
	TOTAL	115	54	169

In addition to the foregoing, the last class was voluntarily attended by two army officers from Camp Gordon Johnston, and two officers of the Public Health Service. Work in the mornings consisted of field and laboratory exercises in malaria entomology given by Mr. J. A. Mulrennan of the State Board of Health, while the afternoons in the laboratory were devoted to intensive drilling in the examinations of thick smears, directed by M. F. Boyd.

Our teaching laboratory can provide working space for 16 students, but we do not have 16 microscopes available for student use. The courtesy of the Navy in providing scopes for their own personnel made possible the utilization of our space to full capacity.

At the request of Captain R. O. Johnston, head of the laboratory at Mabry Field, a special course was given in the afternoons from July 12 to 23, which was attended by five officers and ten enlisted men from that base. This also stressed the examination of thick smears.

TRAVEL, CONSULTATION AND SPEAKING

At the request of the Mexican Government, the director was absent in Mexico from April 20th through May 15th to assist in the development of the malaria program of the health department in that country.

At the invitation of Dr. Thomas Parran, Surgeon General, U. S. P. H. S., and on orders from the Surgeon General of the U. S. Army, the director attended, as one of the representatives of the War Department, a conference on health problems of the Caribbean region, held in Washington, D. C. on June 30th. He also attended a meeting of the Sub-Committee on Tropical Medicine of the Division of Medical Sciences of the National Research Council at Washington, D. C. on July 20th.

EMERGENCY SERVICE

During the first semester frequent shipments of quadrimaculatus ova were made to the Orlando station of the U. S. Bureau of Entomology, until the critical situation in the insectary obliged their discontinuance.

During the second semester several shipments of ova were made to the laboratory of the I. H. D. at the Rockefeller Institute.

Five shipments of nearly 3,000 infected anophelines were made to the Army Medical School, to be used in dissection exercises by students of the course in Tropical medicine. These satisfactorily withstand shipment by air express. In order to have an adequate number survive after maturation of infection, this necessitates infection of approximately half again as many mosquitoes. The production of such numbers, their transportation to the hospital and application to patients, and their care prior to shipment, entail materially added labor.

During the year there were collected from patients on the service some 3,500 blood smears which were shipped unstained to the Army Medical School. The regular personnel of the hospital laboratory, in particular Mr. R. E. Morgan, assumed responsibility for their preparation.

Capt. Glen R. Johnson of Randolph Field spent a week at the hospital collecting about 1,200 smears required for a course given to medical officers at that post.

Several series of blood specimens from non-luetic malaria patients were collected in venules and forwarded to Major Charles R. Rein, M. C., at the Army Medical School, for use in his attempts to improve techniques so as to eliminate non-specific reactions from the Wassermann and Kahn tests.

PERSONNEL

M. S. Boyd and S. F. Kitchen have continued to constitute the medical staff of the station. As previously noted, the director is responsible for the malaria therapy service at the Florida State Hospital, which requires half or more of his time. The position of resident physician for the service continues vacant.

Mrs. R. H. Whitchard continued as secretary and administrative assistant throughout the year.

Miss Lucile Logan was promoted to be supervising technician during the year.

Mrs. Beth C. Beck resigned as technician effective August 15th. She was succeeded by Miss Geneva Green who began training June 1st to take over the position.

Miss Ovelia Linton, who prior to May 31st, served as part time technician, resigned at the end of the year to enter the Medical School of the University of Chicago. She is succeeded by Miss Pauline Chason, who began training October 1st as her successor.

Miss Margaret Young resigned as hospital technician in the hospital laboratory assigned to our service effective May 31st. Owing to a scarcity of qualified personnel, the place was provisionally filled by the appointment of Mrs. Annette Hill, who began training on May 21st. Mrs. Hill served until July 13th. On August 1st the place was again filled by the assignment of Miss Betty Wallace.

Mr. Jack Trawick, insectary technician, was called for service under the Selective Service Act, on December 18th, and his resignation accepted as of January 10th, 1944. The place has been filled by the appointment of Joe Bines, former factotum, as technical assistant, who has long been understudy for the position. This leaves a vacancy in the position of factotum at the end of the year.

HEALTH EDUCATION

ELIZABETH FRETWELL, Director

Members of the Bureau of Health Education worked with all other Bureaus and with county health units in assisting all public health workers to make their activities health educational experiences for the public they serve.

The Bureau worked with state and local school authorities in developing school health programs, as outlined in the cooperative “*Florida's School Health Program*”, a joint publication of the State Department of Education and the State Board of Health. School health programs were carried on more effectively in Florida this year because of local stimulation and activity, supported by the local school system and the local health department, with the state-wide plan being used as a guide. The adaptability of the state school health plan to local situations has been proved in many counties.

Continued emphasis was placed on Negro health problems. The formation, by Negroes, of a State-Wide Negro Health Committee was one of the outcomes of several years of effort. The Negro Committee is not just a set-up on paper. It is by no means functioning in every locality; it is working well and intelligently in a few localities and should continue to grow locally. Negroes are interesting themselves in health problems through the Committee activities and have shown their ability to reach their own people with health information and stimulation. Negro insurance companies in Florida are working with the members of this Committee and with the State Board of Health and county health units, and the companies have volunteered both financial aid and leadership.

The educational facilities of the Bureau continued to be developed and expanded. The staff artists were of great assistance in planning new format for the revised edition of *Florida's School Health Program*. They likewise supervised the printing and illustrating of the monthly bulletin, *Florida Health Notes,* edited by the Bureau.

Several new pamphlets were published by the Bureau: “A V Letter for You” and “Hookworm Disease”. The staff artists also helped in the designing and printing of pamphlets for other bureaus and divisions: “So Much Depends on You” and “Some Information and Friendly Advice for You”, for the Division of Venereal Disease Control; “School Tuberculosis Education” a study unit, in cooperation with the Bureau of Tuberculosis Control; “Some

Advice from Jack and Jill of Happyland Hill" for the Bureau of Dental Health; "After Hookworm What to Eat and Why"; "Now is the Time to Have a Garden", "Guavas Are Good for You" and "The Packed Lunch Joins the Basic Seven" for the Bureau of Maternal and Child Health. The artists also completed the drawings for "Mother and Infant Care", a booklet prepared by the Bureau of Maternal and Child Health, and almost finished the technical drawings for the midwife manual to be published next year.

Preparations were begun in December for the state-wide venereal disease prevention campaign and the Bureau of Health Education assisted in the plans for newspaper publicity, designing exhibits, and distributing other educational material.

The Health Education Consultant was granted a leave of absence in July. A Publicity Consultant was employed in August.

The report of the Bureau's activities continues in the following individual reports—Public Relations by the Publicity Consultant; Negro Health Education by the Negro Field Worker in Health Education; and Library Service by the Library Assistant.

PUBLIC RELATIONS

The Publicity Consultant's activities for the last four months of 1943 included the preparation of routine newspaper copy for the entire organization and two specific publicity campaigns, one on the local level and the other on a State-wide scope. Particularly did the two campaigns call for preparation and concentrated effort. They were the Food Handlers' School at Tampa, November 10-16, and the State-wide education campaign for Venereal Disease Control.

The consultant preceded the United States Public Health Service and Bureau of Sanitary Engineering personnel in Tampa, where she wrote articles about the coming school and visited the restaurants and hotels to check on the registration of employees. When the school began she both wrote and directed the writing of the current stories on the reasons for and the progress of the school. Radio spots and one 15 minute radio script were prepared and used during the course of the school.

For the Venereal Disease campaign, the copy for 15 original half page newspaper ads was prepared and then adapted to as many quarter and eighth page sizes. Fifty radio spots were written along with the collaboration of eight 15 minute radio platters. Copy was also prepared for a number of posters.

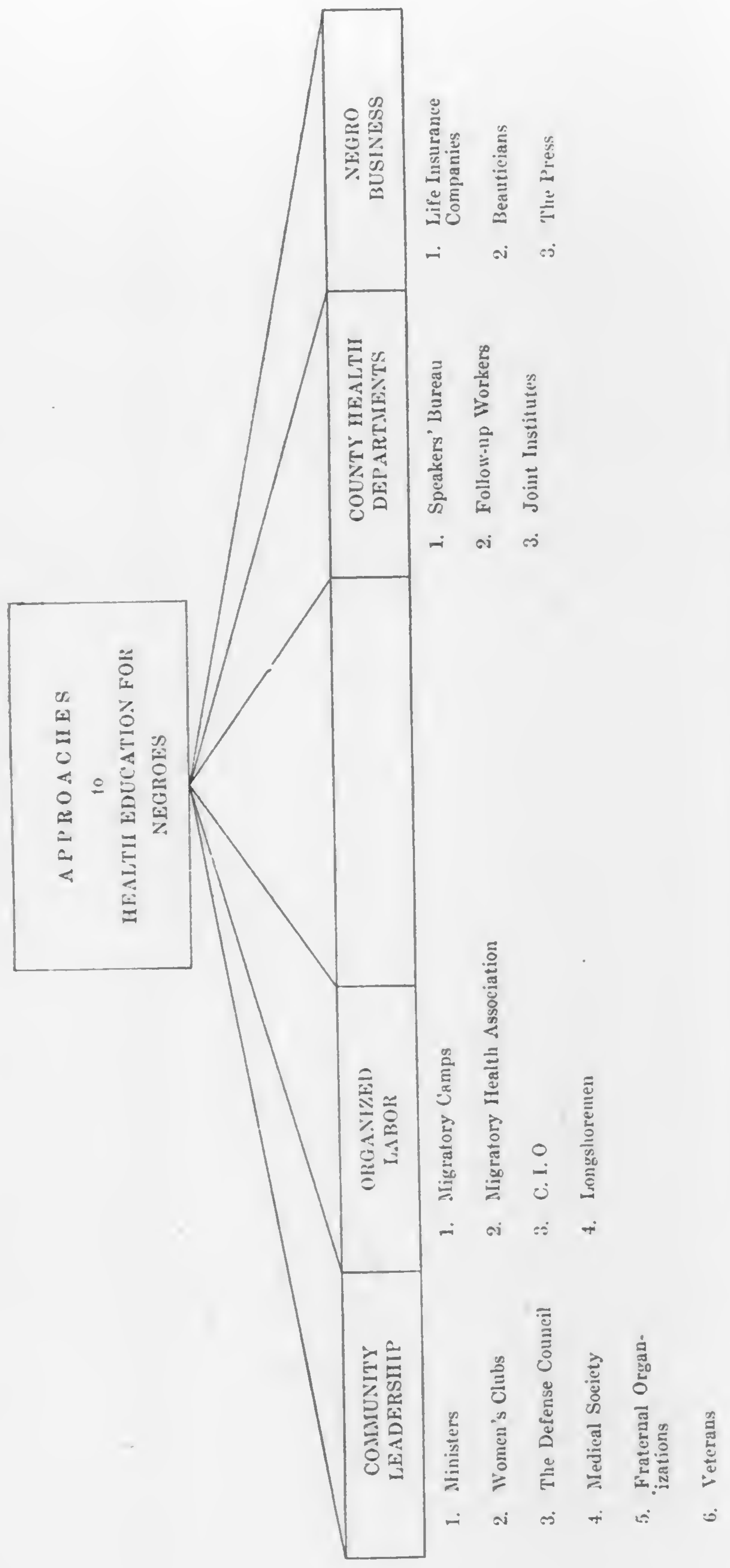
Most of the Citizens' Wartime Health Committees organized by the Division of Venereal Disease Control were visited by the consultant who outlined to the general chairmen and publicity chairmen a method of preparing local stories, what to look for in pictures and how best to utilize all local approaches for gaining public interest in the drive.

News stories were outlined and written in advance from the State level, quoting such persons as Governor Spessard L. Holland; Dr. Thomas Parran, Surgeon General, United States Public Health Service; Dr. E. T. Sellers, chairman, Venereal Disease committee; Florida Medical Society; and Dwight L. Green, president American Federation of Labor, who was in the State the latter part of December.

After visiting with a majority of the health officers during the past four months, the consultant feels that too few of them understand either the value of publicity, or the manner in which best to approach the newspapers for this much needed space. It is therefore, her plan to compile for them a pamphlet on the mechanics and psychology of dealing with the average daily and weekly newspaper editor.

Also, although she has not used her camera since coming to the State Board of Health, she is a trained photographer, and it is the hope of the Bureau to be able to supplement her writing with her camera illustrations.

It is her feeling that health publicity cannot be conducted from a desk in Jacksonville; that personal contact with local health units is necessary to have a better understanding of their problems; that campaigns directed from the local level are also the most effective.



THE SCHOOL HEALTH PROGRAM

COLLEGE HEALTH	JUNIOR & SENIOR HIGH SCHOOL	TEACHER TRAINING	IN-SERVICE TEACHERS
1. Health and Physical Ed. Groups.	1. Lincoln Project.	1. Summer Schools	1. Principal's Workshop
2. Science and Home Economics Groups.	2. Tampa Project.	2. Classes in Methods and Materials	2. Teachers' Meetings.
3. Student Council		3. College Personnel Institute.	3. Professional Study Groups
4. YM & YWCA's			
5. Student Nurses			

NEGRO HEALTH EDUCATION

The program for health education among Negroes had as its objective the organization for community leadership in health education and the continuation of school health programs. The general approaches included:

1. Contacting Negro business men and fostering the health program of life insurance companies
2. Reaching organized labor, which included health education in the migratory camps and among war workers
3. Guiding programs of the Citizens' Wartime Health Committees
4. Promoting school health programs, which can be divided into four basic units:
   - (a) College health programs
   - (b) High school programs
   - (c) In-service teacher-training
   - (d) Pre-training of teachers in teacher education institutions
5. Working with The State-Wide Negro health committee.

LIFE INSURANCE COMPANIES

The three Negro insurance companies operating in Florida, the Afro-American, Atlanta Life, and Central Life, have continued their cooperation with the Florida State Board of Health in the control of venereal diseases. Literature has been distributed by agents throughout Florida. They have assisted other community groups in planning programs, sponsoring the showing of films from the State Board of Health and in further integrating health education with their total program. Executives of these companies have given evidence that interest in health education on the part of their personnel is an investment in the security of their institutions. In connection with local community programs, the district managers have served on committees to plan information conferences and to organize Speakers' Bureaus in cooperation with the program of social protection. The executives of these companies have very freely given their assistance and guidance in state-wide planning as well as in making financial contributions wherever necessary.

ORGANIZED LABOR

Migratory Camps. Venereal diseases in areas where migratory workers live constitute a major problem in some sections of the State. In the absence of county health units, venereal disease education, as well as a general program of health education, is needed in the towns near the migratory camps. Workers coming into the United States from the Bahama Islands to do farming have been faced with very few opportunities for sound recreation in communities near their camps. In these areas the venereal diseases represent a major problem. The Bureau of Health Education has planned a program through which some volunteer work can be done in this connection. The Migratory Health Association and camp administrative personnel have given excellent cooperation to the State Board of Health's program in these areas. Films have been shown, literature and posters planned and designed in the Bureau have been distributed and placed in these communities. Here again the life insurance companies have given a helping hand through their agency personnel.

Absenteeism. Absenteeism is a problem among shipyard workers. This has been due in many cases to venereal disease infections. Special literature was designed for shipyard workers. Films were shown in union meetings to these workers.

Citizens Wartime Health Committees. Perhaps our most effective work has been done through the program of the Citizens Wartime Health Committees. Their program has been planned to include the disemination of general information about the venereal diseases to representatives of organizations throughout many communities. Typical of the conferences held in this connection were information institutes at which time certificates were awarded on the basis of attendance to individuals who had shown their willingness and interest in controlling venereal diseases. At St. Petersburg an institute was conducted jointly by the County Health Department, the Citizens Committee and the Pinellas County Tuberculosis and Health Association. At Panama City and Gainesville, venereal disease institutes were conducted by the County Health Department and the Negro Citizens Wartime Health Committee. Community interest in this type of program has been excellent. The needs for social protection, the reduction of juvenile delinquency, and the need for parent education have also been emphasized in these programs. Thousands of pamphlets, hundreds of posters and films have constituted our sources of material. Cooperation of all local health departments has been very gratifying.

THE SCHOOL HEALTH PROGRAM

College Health. Florida A & M College, Bethune-Cookman College, and Florida Normal College have given excellent cooperation to this bureau. A two-day conference was held in the Library of the State Board of Health with the college personnel responsible for the health education program in these institutions. Included in this conference were professors of health and physical education, biology, and school physicians. This group discussed the basic facts about the venereal diseases and various plans were suggested for providing venereal disease instruction in the teacher training institutions. An attempt was made to provide the informational background for planning this type of education in the general college curricula. Films have been shown to students in all institutions of the State. The problem has been discussed with them and student interest indicates that health education assists definitely in controlling venereal diseases. The student councils, college YW and YMCA'S, the fraternities and sororities, as well as other student organizations, have given excellent cooperation.

Beauticians. A large group of Negro women attend the schools of beauty culture. Student beauticians are included in the large group of educational workers for venereal disease control. Students at the Nickerson School, Jacksonville, and the Angelo School, Tampa, have seen films and discussed the venereal disease problem in detail. The turnover in these institutions is large and a continued effort will be made to secure their cooperation.

High School Programs. The high school student has been reached through the personnel. The Lincoln High School experiment of 1942 has served as a guide for venereal disease instruction in the high school programs. School principals, teachers in home economics, biology, social studies, and physical education have been given guidance in providing venereal disease instruction to correlate with medical diagnostic testing programs among high school students.

The In-Service Teacher. The in-service teachers who have been reached through county teachers' meetings, Jeannes teachers and county superintendents, have manifested a new interest in health education. Bulletin No. 4 "*Florida's School Health Program*" has served as basic material for discussions in health education at county teachers' meetings, study group conferences and planning conferences. Teachers responsible for health instruction in the elementary, junior and senior high schools represent the firing line for executing the health programs in the public schools.

The Teacher Training Institutions. In the teacher training institutions, an effort has been made to give assistance to classes in methods and materials in health education. This bureau has cooperated with directors of schools of education in the three State institutions and thereby has reached a large percentage of teachers in training as well as in service. Considerable time has been given to planning an educational program so that teachers may approach the problem in their communities on the basis of community need.

The State-Wide Negro Health Committee. The State-Wide Negro Health Committee was organized to further coordinate the local community program with the State-wide program and the State Board of Health. This organization has a State chairman and district chairman who will work with the community programs. The Committee plans to cooperate very closely with the Bureau of Health Education to assist in making up materials for distribution and to further coordinate the general public health education program with the local control program.

Ministers, veterans, womens' clubs, fraternal organizations, educators, members of the medical profession, beauticians, the radio, and the Negro press have worked very closely and most cooperatively with the Bureau of Health Education in an effort to improve the health of the Negro population.

THE LIBRARY

The year 1943 was notable in the progress of the Florida State Board of Health Library, for in this year, more than ever before, the value of this medical and public health library was keenly felt. Stated simply, the Library was used. Army and Navy doctors visited the Library almost regularly; requests for books came through the mails from busy physicians all over the state; county and city health officials repeatedly sought newer knowledge of public health procedures; teachers, school administrators, and students made use of the books on health education; and the State Board of Health staff members found its current periodicals and extensive indices of much help in planning their programs.

Requests for books, magazines, and reprints reflected the trend in medical and public health progress. References on diasone, penicillin, caudal anesthesia, pentothal, keratoconjunctivitis—were sought almost as soon as their discovery or existence was made known. Although the Library was subscribing to 67 medical journals and receiving many more as gifts, seven new subscriptions were added in 1943 for the sole purpose of keeping the Library more abreast of the times and providing a wider range of literature. Around 300 new books were purchased. Most of them were on timely subjects, bearing 1942 and 1943 imprints; others were newer editions of standard works already on file in the Library but whose revisions had been eagerly awaited.

Through special funds it was possible to begin subscribing to *Chemical Abstracts,* long requested by many for use in their special field. The comprehensive reference indexes in the Library were further extended when three volumes of *Quarterly Cumulative Index Medicus* were added—volumes 4, 5, and 10, 1882-1883, and 1888. This acquisition almost constituted a ''find,'' for the unusual file of this index is a source of great pride to the Library.

The greater accumulation of books and magazines brought about a physical change in the Library itself; three new double bookstacks were installed and ten drawers were added to the catalog file to take care of the increased number of author, title and subject cards. Due to the expansion also of the reprint collection, another four-drawer steel cabinet was purchased. It may be noted that the bookstacks were made of wood and were especially built for the Library, as wartime restrictions made it impossible to obtain the regulation steel stacks. The walls of the Library were redecorated early in the spring and the change to a cream color gave light and added to the attractiveness of the Library.

The branch libraries of the State Board of Health located in organized county health units continued to receive support, although most of the help during 1943 was ''encouragement,'' as little funds were made available for the purchase of additional books. It is still hoped that these libraries can obtain at least a basic file of books on medical and public health subjects. At this time books are especially needed on sanitary engineering.

As new county health units were organized branch libraries were established. These newer book collections conformed to the older ones, for this expansion was foreseen when the books were originally ordered. The Librarian likewise saw that the county health unit libraries received as many free publications as possible—those of federal and state agencies directly concerned with public health problems.

In cooperation with the Division of Venereal Disease Control, the Library also aided in the selection and purchasing of books for the rapid treatment centers established in Wakulla and Ocala, Florida.

A new feature of the Library's service was the preparation of special book lists which were sent to public libraries to acquaint them with new books on health subjects especially designed for laymen. The first list covered books on sex education and the response of librarians throughout the state was gratifying. Not only were they interested in obtaining notices of books that would be of help to their borrowers, but also they expressed their awareness of the need for newer books on health, simply written, and the desire to make them available to laymen.

Although the State Board of Health Library has many books that can be useful to the general public, its use of the Library is not extensive. The Library is designed primarily for physicians, nurses, dentists, public health and education workers. Yet it is important that laymen be encouraged to read timely books on health as well as know the fundamental facts about diseases, particularly those which are communicable. By sending these special book lists to public libraries, it is hoped that more sound and up-to-date books will be added to their shelves, thereby providing a source of material for those interested.

Present developments in medicine and public health tend to show that the Library will have another responsibility in the future. Now that we are engaged in an all-out war, many military problems will sooner or later become public health problems. Diseases not hithertofore encountered in North America—oncocerciasis, Leishmaniasis, trypanosomiasis, kala-azar, Oroya fever, pinta—may be the concern of health officials as troops return from battlefronts. Military and medical authorities are endeavoring to absorb and put into practice all the knowledge they can find on these diseases. Here the State Board of Health Library can be of practical help; for due to the generosity of Dr. Mark F. Boyd and several others of the Rockefeller Foundation, the Library has an extensive and valuable collection of material on these diseases. A special effort was made during 1943 to classify this information and make it easily available.

The Library staff is grateful for the encouragement received during the year, expressed not only in the gifts of periodicals and books but also in the interest of those who used the Library. The resources of the Library will continue to be developed and expanded to serve technical and general reference needs and to assist physicians, dentists, nurses and others in acquiring additional knowledge relating to their special fields.